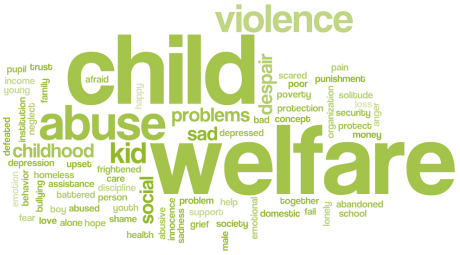


ADOLESCENT CONSULTATION SERVICES

Helping court-involved kids **envision and work toward a better future**

Overlapping Systems: Dual-Status Youth

A STUDY COMPLETED IN MASSACHUSETTS found that 72% of youth committed to the Department of Youth Services (DYS) from 2000 to 2012 also had involvement with the Department of Children and Families (DCF) at some point in their lives. By the time children become court-involved, many have been involved in the child welfare system. These children are known as *dual-status youth*.

DUAL-STATUS YOUTH AND RACE

A majority of dual-status youth are either children of color, experience special education issues, problems at school, or have mental health and/or substance use problems. The foster care system is overrepresented by children of color, who are twice as likely to enter the foster system and more likely to experience multiple placements. Racial and ethnic disparities are pervasive in both the child welfare and juvenile justice systems.

DUAL-STATUS YOUTH AND MENTAL HEALTH

Dual-status youth are more frequently and pervasively exposed to traumatic events. Foster children typically experience significant trauma due to events leading up to out of home placement, but also *as a result* of foster placement. Nearly 80% of foster youth are diagnosed with a serious mental illness, as compared with around 20% of the general youth population.

Foster youth receive mental health treatment less often though are prescribed psychotropic medications at almost four times the rate of youth who are not in the child welfare system. Court-involved youth are also disproportionately underserved in terms of mental health needs, despite the high rate of mental health concerns in this population.

EMMA'S* STORY

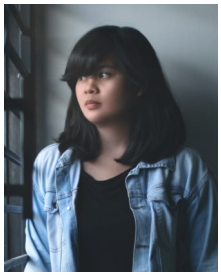
The story of one young woman and her family helps illustrate the overlap between the child welfare and juvenile justice systems.

Emma's mother was the victim of childhood abuse and neglect. At the age of fifteen, she was forced to leave her home when her parents discovered she was pregnant. She was placed in foster care and was later diagnosed with Post-traumatic Stress Disorder (PTSD) and major depression. She struggled for many years with severe mental health difficulties, requiring numerous psychiatric hospitalizations, all while trying to raise her own family.

Emma's father struggled with addiction and had become heavily involved in the court system due to ongoing domestic violence in the home.

25% OF FOSTER CARE ALUMNI WILL BECOME INVOLVED WITH THE CRIMINAL JUSTICE SYSTEM WITHIN 2 YEARS OF LEAVING CARE.

Emma first entered the child welfare system at age six. She was removed from her home due to chronic concerns for her care and safety. She faced a series of foster homes, group homes, and short-term acute stabilization placements. These placements were further disrupted by Emma's tendency to run away and remain missing for weeks to months at a time. She was psychiatrically hospitalized several times due to her risk of suicide. Emma became court-involved after being charged with assault and battery against a peer and then violating her probation. The judge expressed concerns about her mental health and referred her to ACS for a comprehensive diagnostic evaluation.



*To protect confidentiality, ACS does not use the names, photos, or identifying features of our clients

Emma's clinician recognized that her extensive trauma history was at the root of her troubling behaviors. The ACS clinician identified her impulsivity, agitation, and suicidal thoughts as symptoms of complex PTSD. Due to so many out of home placements, Emma had lacked the structure and stability needed to consistently engage in mental health treatment. She had fallen far behind academically and had missed nearly two and a half years of school. She was at high risk for dropping out.

With the collaboration of Emma's DCF case worker, the ACS clinician advocated strongly for Emma to be placed in a long-term, specialized residential facility. This therapeutic setting would provide the stability and support she so desperately needed to begin to heal and make meaningful progress toward her recovery.

HOW ACS HELPS

Dual-status youth are especially vulnerable. The significant overlap between the child welfare and juvenile justice systems, particularly for youth of color, highlights the critical need to ensure that comprehensive mental health services are accessible to this population. Our clinicians listen carefully and help a young person tell their story in a new way. By offering critical and timely interventions, advocacy, and support, they can help shift the trajectory of a young life.

For more information or to help children like Emma, please visit our website at www.acskids.org.

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