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Using Evidence-Based Practices in Transition
to Evaluate Detention Discharge Procedures for
Youth with Developmental Disabilities

A dissertation submitted in partial satisfaction of the
requirements for the degree Doctor of Philosophy
in Special Education

by

Jolan Michelle Smith

2016

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ABSTRACT OF THE DISSERTATION

Using Evidence-Based Practices in Transition
to Evaluate Detention Discharge Procedures for
Youth with Developmental Disabilities

by

Jolan Michelle Smith

Doctor of Philosophy in Special Education

University of California, Los Angeles, 2016

Professor Sandra H. Graham, Co-Chair

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Youth with developmental disabilities are overrepresented in juvenile detention facilities when compared to juveniles without disabilities. In fact, juveniles with disabilities are four times more likely to be found in detention centers as they are to be found in public school settings (Griller Clark et al., 2011; Quinn et al., 2005). Recent efforts to improve the quality of care and services for these incarcerated juveniles have resulted in Los Angeles County's adoption of new policies and procedures aimed at reducing recidivism for this vulnerable population. This dissertation study is situated within a comprehensive evaluation of these new policies and procedures. Employing case study methodology, and a framework of evidence-based practices from the field of special education (i.e., self-determination skills training, coordinated transition

services, and disability-specific considerations), this project examined how a local detention facility implemented youths' discharge plans, and facilitated the transition from detention back to the community for youth with developmental disabilities. Results showed that some elements of the evidence-based practices were present, but other vital elements were missing, such as a dedicated transition specialist, the integration of vocational training activities and self-determination skills training, and development of a meaningful feedback loop for staff who report feeling disconnected from the discharge planning process and implementation. Implications for research, practice, and systems change are discussed.

The dissertation of Jolan Michelle Smith is approved.

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2016

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BIOGRAPHICAL SKETCH

A native of Inglewood, CA, Jolan Michelle Smith earned her bachelor's degree in psychology from Stanford University in 2001, and a master's degree in special education from California State University, Dominguez Hills in 2006. She was a special education classroom teacher for 9 years, serving low-income high school students with emotional disturbance (ED), intellectual disabilities (ID), autism (AUT), and other health impairments (OHI). Jolan serves as a lecturer and faculty member for California State University, Los Angeles, and California State University, Dominguez Hills, teaching courses in special education instruction and curriculum and supervising teacher candidates during field experiences within the colleges of education.

Jolan's research interests include African American students and families in special education, incarcerated youth with developmental disabilities, special education teacher preparation, and cultural considerations in the transition to post-secondary. She has presented her research at the national conventions for Council for Exceptional Children (CEC) and the American Education Researcher Association (AERA), and at the Office of Special Education Programs (OSEP) Project Director's Meeting.

INTRODUCTION

Across the nation, from 2000 to 2008, the number of juveniles in residential facilities decreased by 26% (Sickmund, 2010). This decline has continued, with just under 81,000 youth in residential facilities in 2008 to a reported 54,148 juveniles in residential facilities in October 2013; approximately 15% of these juveniles, or 8,094 youth are California youth (Sickmund, Sladky, Kang, Puzanchera, 2015). Having the largest number of juveniles in detention of all the states, California experiences particular challenges in housing such a large population of youth. In Los Angeles County, recent efforts have focused on improving conditions, particularly for juveniles with developmental disabilities. After threat of a class action lawsuit in 2009, Los Angeles County Probation reached an agreement in 2010 with plaintiffs' attorneys to improve the conditions for youth with developmental disabilities and youth with more complex mental health needs (Public Counsel, 2010). As a result of the settlement, procedures and policies now exist to aide in the identification of youth who may have a developmental disability who come through any of the three juvenile halls (Central, Barry J. Nidorf, and Los Padrinos). These juveniles with special needs are now identified and housed in two juvenile halls (Central and Barry J. Nidorf), where they receive specialized services and programming to address their complex behavioral, mental, and educational needs. From 2012-2016, an evaluation team of researchers with experience in criminal justice and special education conducted an in-depth study of these processes and procedures focused on describing the characteristics of these youth, and evaluating the habilitation treatment plans for these juveniles while they were detained. However, a thorough evaluation of the settlement requires an in-depth look at the discharge planning and follow up procedures employed for these youth with developmental disabilities. This dissertation

study examined the use of evidence-based practices in transition for youth with developmental disabilities as they discharged from Central juvenile hall back to the community. Employing case study methodology with multiple data sources including youth and staff interviews, observations, and case file reviews, this study explored the integration of coordinated transition services, self-determination, and other disability-specific considerations, such as the youth's agreement with discharge plans, their level of understanding, and their beliefs in their abilities to enact the discharge plan. However, before discussing the role of the evidence-based practices, the following sections review the prevalence of incarcerated youth with disabilities, factors that contribute to their repeated involvement in the juvenile justice system, and factors that contribute to successful community reintegration upon discharge.

Prevalence of Incarcerated Youth with Developmental Disabilities

Prevalence rates for incarcerated youth with disabilities have ranged, from a reported low of 1% to as high as 89%, with an approximate mean of 33.4% of incarcerated youth demonstrating learning or behavioral challenges (Cannon, Gregory, & Waterstone, 2013; Griller Clark, Mathur, & Holding, 2011; Katsiyannis, Barrett, & Zhang, 2012; Quinn, Rutherford, Leone, Osher, & Poirier, 2005; Zhang, Barrett, Katsiyannis, & Yoon, 2011). The wide range in prevalence rates is due in part to the differences among states and among correctional agencies in how youth with disabilities are identified. While most facilities rely on educational designations of disability (e.g., having an Individualized Education Plan, or IEP), many schools fail to report students' disabilities and fail to forward IEPs to detention facilities, resulting in a gross underestimate of the number of juveniles with disabilities (Cannon et al., 2013; Quinn et al., 2005). Additionally, the number of incarcerated youth with disabilities may be further

underestimated because of a strict adherence to federal special education designation for the basis of facility identification of a disability; that is, if a youth does not have an IEP, he will not be included in the facility's count of youth with disabilities. This method of identifying juveniles with special needs presents a particular problem because many youth with mental illness and other disabilities do not qualify for special education services because their educational performance is not adversely affected, which is a requirement for having an IEP (Individuals with Disabilities Education Act, IDEA, 2004); if their education is not negatively affected, then these juveniles will not have an IEP and may go undetected within the facility . However, these youth require many of the same intense services that youth with disabilities need in order to reduce their risk for future arrest and detention (Quinn et al., 2005).

Despite the underestimate of detained youth with disabilities, data overwhelmingly support the claim that youth with disabilities are overrepresented in correctional settings as compared to youth without disabilities; juveniles with disabilities are four times more likely to be found in detention centers as they are to be found in regular public schools (Griller Clark et al., 2011; Quinn et al., 2005). In addition to their overrepresentation when compared to youth without disabilities, incarcerated juveniles with disabilities are also overwhelmingly male, African American, and are more likely to have a special education diagnosis of emotional disturbance, specific learning disability, or intellectual disability (Barrett, Katsiyannis, Zhang, & Zhang, 2014; Cannon et al., 2013;Quinn, 2005).

Predictors of Recidivism

While prevalence of youth in residential facilities has declined, the recidivism rates for juveniles has steadily increased during this same time frame. Detailing 1, 2, and 3-year

recidivism rates in a 2007-08 cohort of juveniles who discharged, the California Department of Corrections and Rehabilitation (CDCR) reports recidivism rates of 24.7% at 1-year post-release, 44.7% at 2-years post-release, and 53.8% at 3 years post-release. In the next cohort of juveniles released from detention in 2008-09, the 1- and 2-year recidivism rates are 34.9% and 48.4%, respectively (CDCR, 2012). Although fewer youth are being held in residential facilities, approximately a third of these youth are returning back to incarceration within one year of release. A review of the literature reveals two major factors that contribute to the recidivism of incarcerated youth with disabilities, a lack of educational and vocational engagement upon release, and a lack of coordinated community-based services. Research has shown that youth with disabilities fare better when successfully engaged in both school and community immediately after their release from detention (Griller Clark, Mathur, & Holding, 2011; Griller Clark & Unruh, 2010; Hirschfield, 2014; Hogan, Bullock, & Fritsch, 2010). The initial six months after release is a critical period in transition when youth with disabilities who are engaged in work or school are 2.38 times less likely to recidivate within 12 months (Griller Clark & Unruh, 2010; Mathur & Griller Clark, 2014). However, several barriers to educational engagement exist, including the structural mismatch between detention facilities and schools, as well as delays in enrollment. Local education agencies may be reluctant to reenroll formerly incarcerated youth, school enrollment forms may be lost or delayed in their transference from facility to school, and school credits earned in detention may not count toward more stringent district graduation policies (Hirschfield, 2014). In addition to educational barriers to engagement post-release, researchers have also documented various perceived barriers to vocational engagement such as the lack of jobs, the employers' unwillingness to hire formerly incarcerated

youth, and the youths' lack of employment-related skills (Unruh, Povenmire-Kirk, & Yamamoto, 2009). Unable to develop the skills necessary to obtain and maintain employment, incarcerated youth with disabilities feel unprepared for employment after release, and feel rejected from school environments (Unruh et al., 2009). This push-out and isolation from school and lack of vocational training or employment significantly contributes to the recidivism rates for this population.

Predictors of Successful Reentry

Although research has documented several practices that prevent the smooth transition of formerly incarcerated youth with developmental disabilities back into schools and community (e.g., delayed enrollment, uninviting school/work environments, etc.), we also know quite a bit about those elements that contribute to successful transitions. Not surprisingly, these factors mimic the evidence-based practices for youth with disabilities employed in special education settings. These practices include coordinated transition services (Griller Clark, Unruh, 2010; Mathur & Griller Clark, 2014; Unruh, Gau, Waintrup, 2009), self-determination skills training (Houchins, 2002; McDaniel, 2015), and tailoring instruction to address disability-specific characteristics, such as cognitive delays and learned helplessness (Baltodano, Mathur, & Rutherford, 2005; Hirschfield, 2014). A review of the juvenile delinquency literature yields varying levels of implementation of these evidence-based practices for youth with disabilities, with the majority of research supporting the use of coordinated transition services. Less research has been conducted on self-determination skills training, and other disability-specific characteristics. In the following sections, each of these elements will be discussed in detail in their application to incarcerated youth with developmental disabilities.

Coordinated Transition Services

Adapted from the federal definition of transition services as indicated in the *Individuals with Disabilities Education Act* (IDEA, 2004), Griller Clark (2006) defines transition services in a correctional setting as:

A coordinated set of activities for a juvenile offender, designed within an outcome-oriented process, which promotes successful movement from the community to a correctional setting, from one correctional setting to another, or from a correctional setting to post-incarceration activities including public or alternative education, vocational training, integrated employment (including supported employment), continuing education, adult services, independent living, or community participation.

(p. 5)

Similar to the IDEA school-based definition of transition services, correctional setting transition services still requires the same level of transition planning for incarcerated youth with disabilities as they are guaranteed within the local educational agency. The focus on an outcome-oriented process emphasizes efforts to improve the dismal outcomes for youth with disabilities involved in the juvenile justice system. However, Griller Clark's definition acknowledges the transient nature of youth involved in the correctional system, allowing for transition to and from the community and the detention facility, and from facility to facility. Despite this difference in settings, transition services in a correctional setting include the same services guaranteed under federal special education law to students with disabilities in public schools including educational, vocational, independent living, and recreational activities. Youth with disabilities, whether

incarcerated or attending public schools, are entitled to coordinated transition services and activities that are designed to produce successful outcomes for the youth (IDEA, 2004).

Recent studies have evaluated the success of transition-focused interventions for incarcerated youth with disabilities (Griller Clark et al., 2011; Unruh et al., 2009). In Project SUPPORT (Service Utilization to Promote the Positive Rehabilitation and Community Transition of Incarcerated Youth with disabilities), 320 incarcerated Oregon youth with disabilities participated in an intervention focused on obtaining competitive employment, providing flexible educational placements, teaching self-determination and social skills, and coordinating community-based services immediately upon release. Employing a transition specialist to work with the youth and probation officer, the intervention focused on the identification of the youth's strengths, interests, and needs to develop the youth's transition plan. For comparison, researchers used data from a five year study of 531 Oregon youth with and without disabilities who received parole services as usual (Bullis, Yovanoff, Mueller, & Havel, 2002). Results of the evaluation study proved the effectiveness of the transition intervention, with reported recidivism rates for Project SUPPORT of 15% and 28% at 12 months and 24 months post-release; recidivism rates at the same time points for the comparison group were 33% and 42%, respectively (Unruh et al., 2009). Clearly, intervention that focuses on the coordination of services, immediate engagement in school and work, and skill development, can make a difference in the lives of incarcerated youth with disabilities who are transitioning from detention to the community.

Another intervention study, the Arizona Detention Transition Program (ADTP; Griller Clark et al., 2011), evaluated the merits of *basic* versus *enhanced* transition services. Youth with

disabilities (N=144) from two county juvenile detention centers in Arizona constituted the sample for this study. Basic transition services included the provision of minimally required documents for transition planning, including a handout of special education rights, copy of the completed Individualized Education Plan (IEP), copy of the psycho-educational evaluation, the individualized transition plan, and a transition resource packet for services located near the youth's release address. These five elements were considered basic compared to the enhanced intervention that included thirteen elements as part of the youth's transition portfolio. In addition to the five documents of the *basic* control group, the transition portfolios of youth in the treatment group (n=68) also included results from academic and vocational assessments, a current resume, copies of vital records (i.e., birth certificate, immunization records, social security card), transcripts, school credit analysis, any certificates or diplomas received, and work samples. All 144 youth worked with one of two transition specialists to collect education records, conduct evaluations and assessments, and compile the documents in the transition portfolio. Controlling for other predictor variables such as gender, initial age at detention, and length of stay in the facility, results show that the process of developing an enhanced transition portfolio did indeed reduce the rates of recidivism for these youth with disabilities at 15 and 30 days post release by up to 64 percent when compared to those youth receiving basic transition services (Griller Clark et al., 2011).

While the ADTP demonstrated the effectiveness of intervention at reducing recidivism at 15 and 30 days post-release, at the 90 day marker, 66% of those receiving *enhanced* services still recidivated (compared to 87% in the control group). As a result, researchers have suggested that coordinated transition services are only part of the solution. Sustained engagement and support is

required for youth with disabilities to successfully reintegrate into the community (Hirschfield, 2014; Mathur & Griller Clark, 2014). The use of a transition specialist, who focuses on assisting the youth in transitioning from the facility to the community (or from setting to setting), ensuring appropriate and timely services for these youth, including school enrollment, vocational planning, social and life skills instruction, mental health services, and other public resources as needed, is germane to the youth's positive transition outcomes (Griller Clark & Unruh, 2010). It is the combination of transition services, coordinated by a transition specialist, and the continued active support and involvement of the transition specialist and other positive adult mentors that potentially serve the greatest intervention in a youth's successful transition from the detention facility back to the community, reducing the chances that the youth will recidivate.

Although several researchers have demonstrated the effectiveness of coordinated transition services, these efforts focus on systems and contexts outside of the youth with a disability. While it is important to understand the environmental and contextual factors that influence the youth's actions, one must not ignore the individual and his/her ability to work with the transition specialist to make decisions about the future. Youth with disabilities, in particular, have a long documented history of lacking self-determination skills that enable such decision making. The next section will explore the self-determination literature with regard to incarcerated youth with disabilities.

Self-Determination in Youth with Disabilities

Self-determination is a critical adaptive skill necessary for reducing delinquency and recidivism, and unfortunately this skill is often lacking in individuals with special needs (Barrett et al., 2014; Carter, Lane, Pierson, & Glaeser, 2006; Katsiyannis et al., 2012; Unruh et al., 2009).

It includes the ability to make decisions for oneself in all areas of life, including housing, employment, schooling, family, recreation, and more. Although several definitions of self-determination have been offered (Abery, 1994; Field & Hoffman, 1994; Mithaug, D.E., Mithaug, D., Agran, M., Martin, J., & Wehmeyer, M., 2003; Wehmeyer, 1992), Field and Hoffman (1994) offer a model of self-determination particularly useful for examining self-determination in detention facilities. The authors acknowledge that environmental factors, such as the attitudes of others, and the opportunities for decision-making, play a critical role in the development and maintenance of self-determination skills. However, their model of self-determination focuses on “[achieving and maintaining] self-determination in environments of varying levels of receptivity and support” (p.164). Thus, the model relies less on environmental factors, and more on individual factors within the juvenile’s control. These include knowing self, valuing self, making a plan, acting on that plan, experiencing the outcomes, and learning from the experience. Although summarized succinctly, each of these stages requires a series of sub-skills to acquire and experiences to have in order to become a self-determined individual, capable of making decisions for one’s life. Knowledge of self requires youth to learn their own strengths, know their options, and decide what’s important based on valuing self, and their relationships to others. Based on their dreams for the future, youth need to practice skills in planning, including setting goals, rehearsing, and anticipating outcomes. Then the youth must enact the plan by accessing resources, communicating with others, and dealing with conflict and criticism. The last stages of experiencing the outcomes and making adjustments require youth to compare the anticipated outcomes to actual outcomes, based on an honest evaluation of their own performance, and make adjustments as needed (Field & Hoffman, 1994).

Although Field and Hoffman's model is potentially useful for detention settings where limited opportunities exist to practice self-determined behaviors, very little research exists on self-determination skills training or development within juvenile justice settings. In fact, a review of the literature yields only two studies that evaluated self-determination knowledge in adjudicated youth with disabilities in a residential treatment facility (Houchins, 2002; McDaniel, 2015); all other studies have examined self-determination in home and school settings, where although levels may vary, both settings provide considerably more opportunities for self-determination than a detention setting. Houchins' (2002) experimental pretest-posttest study of 45 youth from two secure treatment facilities evaluated an intervention to teach self-determination skills to youth with and without disabilities, including learning disabilities, emotional disabilities, among others. After condensing the Field & Hoffman's (1996) *Steps to Self-Determination* curriculum from 16 weeks to 4 ½ weeks to fit the shortened detention stay of the youth at these particular facilities, and modifying the selection of mentors to suit the availability of staff in this restricted environment, results from the study showed no significant difference in pretest and posttest scores of youth who received the explicit self-determination skills knowledge instruction and those who did not. However, a significant difference was found in the self-determination knowledge of youth with disabilities and youth without disabilities; youth with disabilities scored lower on self-determination knowledge than youth without disabilities. While the self-determination intervention did not lead to significant improvements in self-determination knowledge on the posttest, group differences reveal a need to intervene with juveniles with disabilities who scored significantly lower than juveniles without disabilities (Houchins, 2002).

In a recent study, McDaniel (2015) evaluated *Possible Selves* (Hock, Schumaker, Deshler, 2003), a self-determination curriculum, implemented with 17 youth ages 13-18, who resided within a short-term detention facility. Similar to the Houchins study, the 7-lesson *Possible Selves* curriculum was modified to be delivered within one 6-hour day of instruction, once a month for 6 months. Measuring intrinsic motivation, social validity of the intervention, and recidivism, McDaniel found that intrinsic motivation on target activities improved post-intervention. Additionally, youth rated the intervention favorably on a Likert scale, and using 6 months post-release as a data point for recidivism, McDaniel (2015) found a 14% decrease in recidivism for youth who participated in the intervention versus the facility's previously calculated recidivism rate of 35%.

Although self-determination skills instruction has a long documented history of effectiveness within special education school settings (Carter et al., 2006; Mithaug et al., 2003; Wehmeyer, 1992) little research exists on the application of self-determination within correctional settings. Houchins (2002) and McDaniel (2015) have documented the effectiveness of self-determination curricula within a detention setting, but results are mixed. Further investigation of the implementation of self-determination curricula with juveniles with disabilities in a detention setting is warranted. As curricula are modified to fit within the short-term detention facility, several other considerations should guide the implementation of interventions with youth with disabilities; addressing the youth's level of cognitive understanding is one such consideration. The next section describes other disability-specific characteristics to consider when evaluating efforts to facilitate the transition of juveniles from detention facilities back to the community.

Disability-Specific Considerations

Incarcerated youth with disabilities require specialized instruction to learn the skills necessary to become self-determined individuals, make better decisions, and prevent recidivism. They also require direct, explicit instruction in basic academic skills, social skills, vocational skills, life skills, and more (Baltodano, Platt, & Roberts, 2005). Through direct, explicit instruction that is relevant to the juvenile's interests and learning style, youth with disabilities will better understand, agree with, and believe in their efficacy to enact the transition plan.

In teacher education programs, students learn the importance of checking their pupils' levels of understanding. This practice is essential for working with youth with disabilities where many youth exhibit lowered cognitive levels, or impaired social skills, or communication skills. While these practices are common for special education teachers in school settings, agencies that work with juvenile detainees with developmental disabilities must also check for youth understanding of the transition process. In a study of 120 incarcerated youth, ages 12-17, 34% of the youth self-identified as receiving special education services; however, among this group, 37.5% indicated that they did not have an IEP, a requirement for receiving special education services (Baltodano et al., 2005). This lack of special education knowledge reflects the potential for delayed school enrollment, or misplacement in general education classes where these youth will not receive the specialized instruction they need to address repeated school failures. Lack of understanding of the transition process potentially leads to the lack of success in discharging from detention and remaining out of detention, thus juveniles with developmental disabilities must constantly be assessed for their level of understanding throughout the transition process.

While constantly checking the understanding of the juvenile, another consideration when working with individuals with developmental disabilities is the youth's level of agreement with the transition plan. A juvenile can hardly be expected to comply with a plan they do not understand, or with which they do not agree. Baltodano, Mathur, and Rutherford (2005) conducted a review of studies to identify the contextual factors that promote or hinder successful transitions for incarcerated youth with disabilities. Based on their review, Baltodano and colleagues suggest that preplanning for transition begin very early, as many youth were unaware of their own transition plans during prerelease interviews (Baltodano, Mathur, & Rutherford, 2005). If youth are not aware of the transition plans, the likelihood that they agree with the plan can be called into question. While many adults and agencies interact and collaborate on behalf of the youth with disabilities, every effort should be made to include youth with disabilities in the decision-making processes. Ideally, transition plans should be youth-centered and youth driven, not driven by agency or adult concerns. This will ensure the youth's involvement and agreement with the transition plan being developed; this buy-in is vital for ultimate transition success (Hirschfield, 2014).

Lastly, with greater understanding of the transition process and agreement with the transition plan, incarcerated youth with developmental disabilities must also believe in their abilities to be successful in transitioning back to the community. For youth with learning or other developmental disabilities, the psychological phenomenon of learned helplessness (Seligman, 1975), in which a person, based on prior experience or learning, gives up and fails to persevere for fear of failure, can be particularly salient for detention facilities. Given the adverse backgrounds of many juvenile delinquents with disabilities (e.g., early onset of involvement with

juvenile justice, family history of criminal activity, repeated school failure, etc.), interventions and efforts at improving the transitions of youth from detention back to the community should anticipate and address the learned helplessness in this specialized population (Hogan, Bullock, & Fritsch, 2010). In focus groups with transition program board members and transition staff members, Mathur and Griller-Clark (2014) found that the main barrier to successful reentry was the youths' own mindsets; adult staff reported that the youth 'are institutionalized,' 'don't think they will be able to live a crime free life,' and did not see themselves as capable of making the correct decisions to maintain success (p. 726). Different sides of the same coin, learned helplessness and institutionalization are disability-specific phenomena that can potentially cripple a youth's belief in his ability to successfully transition out of detention.

Conceptual Framework for Successful Transitions

Given the research on transition from detention to community for youth with developmental disabilities, a model that combines evidence-based practices and specific knowledge of working with youth with developmental disabilities may be useful to improve efforts at increasing their success and reducing recidivism for this population. Figure 1 depicts an evidence-based conceptual model that highlights the provision of coordinated transition services, the explicit instruction of self-determination skills, and the importance of other disability-specific characteristics and considerations that may affect the ultimate transition success of individuals with developmental disabilities.

As an evidence-based practice for youth with disabilities involved in the juvenile justice system, coordinated transition services must minimally entail interagency linkages and collaboration, a person responsible for coordinating services and transfer of records, activities in

education, vocational training, independent living, and recreation, and mechanisms for tracking long-term outcomes in the community (Griller Clark, 2006; Griller Clark, & Unruh, 2010). While research has demonstrated the effectiveness of comprehensive transition interventions for detained juveniles with disabilities (e.g., Project SUPPORT, Unruh et al., 2009; ADTP, Griller Clark et al., 2011), these youth continue to return to detention at rates higher than their nondisabled peers. Addressing the external factors of securing educational placements and housing placements, connecting the youth to community and social resources, and tracking outcomes will provide only limited success as evidenced by previous research (Griller Clark et al., 2011). To improve transitional outcomes for this population of detained youth, one must also address their need to learn self-determination skills.

In order to gain self-determination skills, youth with disabilities must learn about their options, learn who they are and what they value, and how that connects to their future plans. They must know who they are, value themselves, make plans for the future, act on those plans, and experience the outcomes of their actions, learning from their mistakes (Field & Hoffman, 1994). Self-determined youth must be taught the skills to make realistic plans, and then given opportunities to interact with those systems and structures to enact the plan. Through these opportunities to act on plans, youth with developmental disabilities gain experiential knowledge and can make adjustments to their behavior and thoughts for better future outcomes.

Finally, the literature suggests a need to address certain characteristics of youth with developmental disabilities. One cannot expect youth to be successful in transition if they are not cognizant of the transition plan, or do not understand the relevance of transition planning (Baltodano et al., 2005). Extending the idea of understanding further, efforts to improve

transition for youth with developmental disabilities must also assess the youth's agreement with developed plans. With youth-centered plans that involve the juveniles throughout the process of decision-making, youth with disabilities are more likely to agree with developed plans and take action (Hirschfield, 2014). Lastly, with improved understanding of the transition process, and agreement with the plan, youth may be more likely to believe in their ability to successfully reenter their communities and avoid recidivism.

Context for the Current Study

In December 2010, a legal settlement between Los Angeles County, and Public Counsel and Disability Rights California, attorneys for the plaintiff, stemmed a potential class action lawsuit and sought to improve conditions and outcomes for detained youth with developmental disabilities through the development of new policies and procedures. This policy, known as Directive 1280 and its reiterations, or simply as *the Directive*, was designed to provide “minimally adequate care and protection from harm” to youth with developmental disabilities, and “with reasonable modifications to their treatment” to improve the quality of treatment and habilitation services while detained (Final Settlement Agreement, I.T., et al. v. Los Angeles County, et al., p.1). In addition to protections and treatment during detention, other policies and procedures specifically called for a focus on discharge planning, to increase access to community-based placements and other programs and services. The settlement also called for a 3-year monitoring period of Probation's efforts at identifying, serving, and tracking outcomes of youth with developmental disabilities. Public Counsel and Disability Rights California enlisted the assistance of experts in the fields of criminal justice and disability research to conduct a comprehensive assessment of efforts to improve the identification and handling of youth with

developmental disabilities, and improve the services and supports received as they transition successfully back into the community. The ultimate aim of the new policy for youth with developmental disabilities was to reduce recidivism and violence among youth with developmental disabilities.

Using Probation's data from 2012-2014, results from the evaluation described the characteristics of youth identified as developmentally disabled within Los Angeles county, described the process of interagency collaboration, and assessed the procedures against the intent of the settlement and resulting policy (Herz, Weinberg, Smith, Chan, Oshiro, 2016). Other data sources included observations of monthly Integrated Habilitation Treatment Planning (IHTP) meetings during which representatives from each agency involved in the collaboration, Department of Mental Health (DMH), Los Angeles County Probation, Los Angeles County Office of Education (LACOE), and Juvenile Court Health Services (JCHS), convened to plan or review goals for the minor. During these meetings discharge plans were discussed as well as case-specific information vital for planning for the youth; the discharge plan detailed the youth's long-term goals, and information the youth would need in the community to support those goals. Researchers conducted staff interviews with persons involved in the DD program across the four agencies, and reviewed youth case files. Results from the study revealed that approximately 329 youth with developmental disabilities entered juvenile hall between May 2012 and December 2014; 88% were male, and they stayed in the detention facility for an average of 4.64 months (Herz et al., 2016). Of the qualitative results, major findings highlighted the strength of interagency collaboration, the need for more staff training, the lack of measurable written goals, and confusion about discharge planning (Herz et al., 2016). Accordingly, this dissertation study

focuses on the evaluation of processes, services, and supports aimed at the successful transition of youth from juvenile hall back to the community.

Drawing on the literature base on best practices in transition from the field of special education, this study seeks to answer the overall question: *How effective is the discharge planning process for incarcerated youth with developmental disabilities?* Specifically, through the application of an evidence-based theoretical framework, study questions included the following: 1) *How does the process of discharge planning incorporate coordinated transition services for youth detainees with disabilities?* 2) *How does the discharge process facilitate self-determination skills training with youth detainees with disabilities?* Additionally, to fully capture the effectiveness of the entire discharge planning process, it is necessary to assess the youths' buy-in with their discharge plans, including beliefs in their abilities to be successful. Thus, the third and final study question follows: 3) *To what extent does the process of discharge planning consider the unique characteristics of youth with developmental disabilities, namely their ability to understand, agree with, and believe in their efficacy to implement their discharge plans?*

METHODOLOGY

As previously mentioned, this study seeks to examine how youth with developmental disabilities discharge or transition from the detention facility back to the community or to suitable placement. The process of discharge was examined due to recent policies and procedures put into place as a result of a legal settlement between Probation and Class counsel. Specifically, this study aimed to evaluate the efficacy of these policies and procedures by examining the influence of evidence-based practices with regard to youth with developmental disabilities. This methodology section begins with a description of my epistemological and ontological viewpoints, before proceeding to how case study design suits the needs of this study. Next, I will describe the procedures for gaining access to the site, collecting and managing data, and analyzing the data, before concluding with steps taken to ensure dependability and trustworthiness of the results (Creswell, 2007; Lincoln & Guba, 1985).

Within qualitative research it is important to position oneself and describe your ontological and epistemological viewpoints early so that the reader may understand any potential biases within the study, from the way in which the study is designed, data collected and analyzed, as well as how the final results are interpreted. As a qualitative researcher, I ascribe to an interpretivist or constructivist approach in which meaning is subjective and variable, and depends on the multiple viewpoints of those involved in the phenomenon. Coupled with this constructivism, I adopt a pragmatist worldview in which the best methods for addressing a research question may be qualitative or quantitative, and changes to fit the particular context and best method for addressing a particular question (Creswell, 2007). Pragmatists are not tied to any particular research methodology, and will adapt their methods to best address the question at

hand. Given this flexibility in methodology inherent in pragmatic viewpoints, I am able to apply a theoretical framework of evidence-based best practices to this case study, while remaining vigilant to the discovery of how multiple perspectives define the ultimate outcome variable.

In addition to disclosing my worldview, it is also important to describe why I chose case study methodology as the research design. Case study methodology best answers *how* and *why* questions when there is a focus on contemporary events, but when the researcher cannot manipulate the relevant behaviors (Yin, 2014). Additionally, case studies allow for the collection of direct observations and interviews with the people involved in the process or event; this differs from other forms of social science research such as histories, experiments, surveys, and archival analysis in which different forms of evidence and behavioral manipulation are required to address those research designs. Thus, case study design is particularly relevant for this study which combines direct observations, youth and staff interviews, as well as document analysis to answer the question of how recent policy changes to discharge planning incorporates evidence-based practices for working with youth with developmental disabilities. It should also be noted that although the site and collaborative agencies are identified as is common in case study research, the confidentiality of actual participants has been maintained through de-identification of quotes, use of pseudonyms for youth participants, and the use of composite descriptions.

Defining the Case & Gaining Access

The case in this study is the process of discharge planning for youth with developmental disabilities. The *Directive* called for the implementation of several procedures that impact the transition of these youth to and from the facility, including the development of a discharge plan

within 3 days of a youth's entering the facility, and identifying the community supports needed for the youth upon discharge from the facility. This discharge plan is completed by the IHTP Coordinator, who is a specially assigned Probation staff who oversees the meetings and corresponding documentation involved with the youth with developmental disabilities program. The discharge plan is attached to the IHTP document, and is then reviewed every 28 days the youth remains in detention at the youth's monthly interagency IHTP planning meeting. Thus, the *case* of discharge planning is a process, which begins within 3 days of a youth's entrance to the facility and extends through the transition to the next placement, whether the youth returns home on probation, or to another suitable placement. However, to delimit the study, the data are bound by location and timeframe. Central juvenile hall, is the particular detention facility where the juveniles who have or are suspected of having developmental disabilities are housed. While other facilities within the county's Probation department house youth with developmental disabilities, youth at these facilities have other extenuating circumstances (e.g., being tried as an adult, etc.) that preclude their inclusion into the examination of Probation's discharge planning efforts, thus limiting this case study to the examination of efforts at one particular site, Central. Further binding the study, the policies and procedures pertaining to discharge planning were implemented beginning in 2011, with actual monitoring of discharge planning beginning in August 2012 when the research team began attending IHTP and discharge planning meetings, and continuing through February 2016 when the last youth interview was collected.

As previously described, a research team comprised of two expert professors, one in criminology and the other in special education, two doctoral students with extensive knowledge of special education, and a master's level research assistant in criminology with extensive

statistical knowledge, began evaluating the efficacy of the new *Directive* policy and procedures through a mixed methods study (Herz et al., 2016). While the scope of this work was to evaluate the *Directive*, its implementation, and its efficacy in improving the identification of, and care and treatment of detained youth with developmental disabilities, another major goal of the *Directive* was to reduce recidivism for this population through improved efforts at discharge planning. Therefore, this study of discharge planning efforts at a particular juvenile detention facility, from 2012-2016, addresses the potential of the *Directive* to reduce recidivism by focusing on the incorporation of evidence-based practices for youth with developmental disabilities. Through the larger project of evaluating the *Directive* with the research team, I gained access to people and data specifically relevant to the transition and discharge of youth with developmental disabilities. The people, and data sources, and procedures used for this study are described in full in the following sections.

Participants

Participants included incarcerated and formerly incarcerated youth with developmental disabilities, as well as staff from various agencies who are involved with these youth, and thereby involved, directly or indirectly, with discharge planning.

Agency staff.

The agencies represented in the staff interviews included Probation, Mental Health, County Office of Education, and Juvenile Court Health Services. From May through September 2014, a total of 31 staff members across the four agencies were interviewed by two or three members of the research team in a one-time interview. Staff interviewed included 8 mental

health therapists who provided weekly individual therapy sessions to the youth, 4 school psychologists who were responsible for educational case management for this population, 1 health nurse, 4 field probation officers responsible for youth upon discharge, and 14 additional Probation staff involved in the operation of the developmental disabilities program. Staff were identified for interviews through their participation in monthly IHTP planning meetings, as observed by myself and another doctoral student who attended 97 meetings, or because of their identification as a director or administrator over programs impacting youth with developmental disabilities. Interviews typically lasted between 30 to 45 minutes, were audio-recorded for accuracy, and transcribed by a professional transcription company.

Youth.

Nine youth with developmental disabilities were the other participants in this case study. To focus specifically on discharge, two types of youth were identified as informants on the process of discharge: youth who went through the discharge process, but who also returned back to detention within six months, and youth who went through the discharge process and who successfully remained in the community, either home on probation, or in suitable placement for more than six months. Six months was determined as the marker for success based on literature from the field showing that a youth has a greater chance of not recidivating if he is able to remain on the outs for six months or more (Griller Clark & Unruh, 2010; Mathur & Griller Clark, 2014). All youth interviews were audio-recorded for accuracy, lasted approximately 45 minutes, and were transcribed by this researcher.

Returning youth.

Youth who returned to the facility were identified from monthly IHTP calendars that designate the schedule and type of IHTP meeting for all youth in the facility identified as having a developmental disability. In addition to review meetings, youth who have entered the facility within the past month are divided into two categories: those who are newly identified by Probation as DD, and thus are having an initial IHTP meeting, and those who have been previously identified by Probation as having a developmental disability, but who were not on the IHTP calendar from the previous month, and thus are having a review/initial IHTP meeting. The type of meeting (i.e., review, initial, and review/initial) was used to identify those youths who were returning to the facility within 6 months. Each month, approximately 2-3 youth were identified as review/initials from the calendar. However, due to the transient nature of the detention facility, as well as the consent procedures for this population, I observed 7 review/initial IHTP meetings, and interviewed these 7 youth between March and June 2015. Consent to interview youth in the facility was obtained from the youth's court-appointed public defender or panel attorney for all youth in detention. An attorney was present for all youth interviews in the facility to ensure the youth did not reveal any incriminating information about his court case. Over the 4-month period, 14 youth were identified through the IHTP calendar, however, consent could not be obtained for 3 youth, and another 4 youth discharged from the detention facility before their IHTP meeting took place.

Community youth.

Locating youth who successfully remained out of the detention facility for 6 months or longer proved to be much more difficult, because youth were either returning to the facility within 6 months, or their probation cases were terminated, and were therefore unavailable to this

researcher. Initial identification of the pool of youth who might qualify began in August 2015 by reviewing Probation files of youth intake and discharge dates; fifty-nine youth were identified with discharge dates from August 2013 through September 2014. A Probation director then verified current status of youth, ensuring they were still on active probation (i.e., case had not terminated), and had not returned back to detention, at this facility or elsewhere, within the past 6 months. From this group of 59, only 5 youth fit the two criteria and were contacted by probation officers, but later chose not to participate. The yield was so low because youth either had terminated or closed cases with Probation (n=22), had been re-detained (n=22), had sealed or deleted files (n=8), had their cases dismissed (n=3), or the youth did not actually discharge (n=1), but rather moved from one facility to another facility in the county's juvenile system. In November 2015, another round of verification occurred for youth with discharge dates from October 2014 through April 2015. Of 65 potential cases with discharge dates in the new timeframe, a final list of 6 youth, their contact information and parents' information, was provided to me in late January 2016. Over the next month, I contacted the parents/guardians to explain the study and obtain consent to contact the youths who were either in suitable placement (n=4) or home on probation (n=2). In the final sample of youth who successfully remained out of detention for 6 months or longer, only 2 youth completed interviews of the 6 potential cases identified, one youth who returned home on probation, and another youth who transitioned to a suitable placement. Specific information for each youth participant is provided in the results section.

Data Sources

In order to conduct a proper case study, multiple sources of data must triangulate to ensure robust, trustworthy results (Yin, 2014). To this end, semi-structured youth and staff interviews served as one type of data source to inform this study on the process of discharge. As previously described, 31 staff completed semi-structured interviews with researchers who asked the following questions: *Would you describe how Probation deals with a DD youth's discharge? Are you involved in implementing the Discharge Plan? If yes, what is your role? If no, which staff members are? How does the Discharge Plan get implemented? What makes it easy or difficult to implement?* Youth were asked about their experiences in discharge in a 3-part semi-structured interview protocol. The first part asked youth to recall their experiences of discharge before recounting current plans and experiences. The last section asked youth to describe their dreams and plans for the future. Sample youth questions included: *What do you think could have helped you make a better transition back to the community, and stay out of juvenile hall? When you were out was there someone you contacted (or who contacted you) who helped you enroll in school, find a therapist, find a job or enroll in a training program? What are your goals in life? Why are they important to you?* The full *Staff Interview Protocol*, Appendix A, and the *Youth Interview Protocol*, Appendix B, are included.

Other data sources used for triangulation of findings included direct observations of treatment planning meetings in which discharge planning occurred, as well as discharge plan documents, monitoring and compliance reports from Class counsel, and policy documents detailing the purpose of the discharge policies and required procedures. Discharge planning and revisions to the discharge plan took place at monthly IHTP meetings which were scheduled every 28 days a youth with developmental disabilities remained detained at the facility. These

meetings were set by a Probation staff assigned to coordinate these meetings and other procedures resulting from the *Directive*; they were scheduled from 9:00am through 2:00pm on Tuesdays and Thursdays, with a maximum of up to 5 meetings taking place in one day. A total of 96 meetings for 58 unique youth at the facility were attended by one to three of the researchers from August 2013 through May 2014. Researchers took notes on who attended the meetings or participated by phone, the obstacles the youth is facing (e.g., depression, isolation, anxiety, drug abuse, etc.), monthly treatment goals for the unit (e.g., participate in unit activities), for mental health (e.g., participate in weekly counseling sessions), for the school setting (e.g., attend school daily with no restructures or referrals), discharge plan community supports, power dynamics during the meeting, among other information. As previously mentioned, I also attended the IHTP meetings of the 7 returning youth who participated in the youth interviews, resulting in observation notes for 103 planning meetings.

Documents for review included 50 discharge plans for a sample of youth, Class counsel monitoring reports, as well as the written *Directive* and its amendments, which spell out the policy and procedures to follow for working with this population of youth with, or suspected of having developmental disabilities. The discharge plan, which must be completed within 72 hours of entering juvenile hall, is a 3-page document that includes contact information for the youth's parent or guardian, attorney, probation officer, last school of attendance, and Regional Center and Department of Child and Family Services (DCFS) caseworkers, if applicable. The second part of the discharge plan identifies the community supports the youth and the caregiver will need in the areas of probation, mental health, education, and health services. The discharge plan concludes with a section where the youth provides answers to questions about education,

community, and personal goals. The 50 discharge plans selected for review were purposively selected by the research team because they are the documents for youth whose IHTP planning meetings were observed by the researchers, and they represent youth who live in the unit where the majority of youth with developmental disabilities are housed, as well as youth who resided in specialized units (e.g., enhanced supervision, girls, youth under the age of 13, etc.).

Lastly, in addition to the semi-structured youth and staff interviews, meeting observations, and the completed discharge plan documents for 50 youth, other documents made available for the study were the *Directive* and its iterations, which detail the entire process of identifying, referring, treating, and discharging minors with developmental disabilities, as well as other directives on field operations pertaining to the referral and services of these youth as they transition from detention into suitable placement.

Data Analysis

Data for this study were analyzed in multiple ways, to accommodate the multiple sources of data. Staff interviews were coded by two other researchers and myself, using the computer-assisted qualitative data analysis software, Dedoose. The researchers developed a 30-item code sheet based on the interview protocol used to interview agency staff, reached consensus on code application, then independently completed reliability tests. Cohen's kappa coefficient, which ranged from 0.70 to 0.74 and indicated moderate to strong agreement between raters, was calculated for inter-rater reliability for the staff interviews. Seven of the thirty total codes related specifically to the discharge process and were used for the analysis in this dissertation: *current sources of information for discharge planning, desirable or alternative sources of information,*

discharge challenges, discharge process, implementation, revision of discharge plan, and role in development of the discharge plan. These codes were used to define staff impressions of the discharge plan as a document, and of the discharge planning process.

Youth interviews were collected and analyzed by this researcher. The nine transcripts were hand-coded using both a priori and ground up approaches. All youth interviews were initially open coded to capture the words of the youth and remain true to their interpretations of the experience of discharge planning. From initial open coding, a list of 38 codes was generated. Codes included ideas about *religion, respect, trauma, vocational experiences, educational history, role of the probation officer, limited understanding, feelings,* and more. These codes were then combined and reduced to 13 second level codes, including, *daily life, education, placement, services on the outs, vocational experiences, future dreams,* etc. In a final step of data reduction, the 13 second level codes were grouped into one of the three codes on evidence-based practices: *coordinated services, self-determination, and disability-specific considerations.* To illustrate, lack of control was a code that emerged from preliminary coding of the transcripts. This code applied in various domains at the secondary level including daily life (in placement or on *the outs*), discharge process and planning, and future dreams. Finally, a perceived lack of control in daily life, in the discharge process, and in future dreams showed patterns of affecting these youths' experiences in coordinated transition services and their self-determined action. Another code of respect was evident at the secondary level when discussing the role of the probation officer, and services in placement or in the community. These notions of respect with regard to the probation officer and getting services emerged in the discussion of coordinated transition services. See Appendix C for the *Youth Interview Coding and Data Reduction Scheme*

for more information on which primary codes applied to themes at the secondary and tertiary levels.

Observations were coded by two researchers, myself and another doctoral student. We created a database of 104 binary variables (i.e. present/not present) on which we rated each of the 96 meetings attended at this facility. To assess inter-rater reliability, we calculated percent agreement and Cohen's kappa on 16 meetings attended by both raters. Overall, the raters agreed 88.1% of the time on the 104 items; the kappa coefficient was 0.564, showing only moderate agreement. Additionally, I coded the 7 meetings I attended during the youth interview data collection using the same spreadsheet and variables. Variables included which members of the different agencies attended meetings, the contribution of valuable information to the meeting, power dynamics, reporting of required information (e.g., reporting current grades or high school credits, current obstacles being faced, etc.), among others. Specifically, to focus on the discharge planning process, six variables were closely examined: DPMG - discharge plan missing goals; DPNC - discharge plan with no connection to stated needs; DPSI - discharge plan with supports not appropriately identified; DIPP - discrepancy in program participation; YII - youth input issues; LYI - limited youth involvement. An additional set of 8 variables (i.e., participation, attendance in person, missing information, and recommended services and programs) were also included because they focus specifically on the roles of field and placement probation officers. See Appendix D, *Observation Variables Related to Discharge Planning*, for the full list of 14 variables used for coding the meeting observations.

Lastly, documents were coded by this researcher with the same three final themes of coordinated services, self-determination, and disability-specific considerations. Procedures

detailing the job duties of specialized staff within the program for developmentally disabled youth were typically coded as coordinated services, while procedures detailing what input the youth is supposed to have (e.g., discharge plan revisions) were coded as attempts at facilitating self-determination. Over the course of the study, several changes were made to the discharge plan itself (e.g., the youth questions were changed) to make it relevant to the needs of the youth; these actions of policy change were coded as disability-specific considerations. In addition to policy documents, the actual discharge plans were coded by myself and another doctoral student, using a case file review rubric that rated the elements of the written discharge plan for youth with developmental disabilities. Four statements on the rating form directly addressed the quality of the written discharge plans: discharge plan describes the youth's medical needs and supports; discharge plan describes the youth's mental health/behavioral needs and supports; discharge plan describes the youth's educational needs and supports; discharge plan describes the youth's legal needs and supports. Each of these statements were rated either yes, no, or partial; agreement between the two raters was 100% for all items on the case file rubric.

With the multiple sources of data (i.e., observations, documents, staff and youth interviews), coded in various ways due to the nature of the project, it was important to align each of the codes to the final themes of focus in this case study. Accordingly, each analysis of a datum source was mapped onto one of the evidence-based practices, thus allowing the integration of all sources to inform the answers of how the process of discharge at this particular facility, during the time frame of 2012-2016, implemented coordinated services, facilitated youth's self-determination, and incorporated disability-specific considerations.

Dependability & Trustworthiness

Several methods were employed in this study to ensure validity and reliability, or rather credibility and trustworthiness in the case of qualitative research (Creswell, 2007; Lincoln & Guba, 1985). In addition to prolonged field engagement of 4 years observing meetings and conducting interviews within the facility, other methods of ensuring trustworthy results include data triangulation as well as some researcher triangulation. While youth interviews were coded exclusively by this researcher, other data sources (e.g., staff interviews, observations, and discharge plans) were rated by at least two researchers, and in some cases, three researchers collaborated to create coding schemes and reconcile coding discrepancies. This research also employed a thick audit trail and case study database to manage the multiple sources of data (Yin, 2014). Lastly, throughout the years of study, key informants helped guide the analysis and interpretation of data, including Probation directors and staff, attorneys who were involved in the development of the program for developmentally disabled youth, and expert researchers in criminology. These methods, in addition to the thick, detailed descriptions and participant quotes provided in the next chapter serve as evidence of the logical conclusions and trustworthiness of the interpretation of the data (Brantlinger, Jimenez, Klingner, Pugach, Richardson, 2005).

RESULTS

Youth Participants

A total of nine youth completed interviews for this study, seven youth who returned to the detention facility within six months, and two youth who remained out of detention for over six months (Table 1). The youth ranged in age from 14 to 18 years. Of the seven returners, Keith, Frank, Faith, and Jennifer were returning to the facility from the home environment. Nate, Gabe, and Chase returned from a suitable placement group home, with Gabe and Chase running away from their placements; Nate's placement requested his transfer. Five of the seven returning youth were Regional Center clients, three were involved in gangs, and all had IEPs, or individualized education plans, entitling them to specialized transition services under special education laws. The two youth who successfully remained out of detention for six months or more were Damon, an African American male, home on probation and age 18 years, and Blair, a Caucasian male in suitable placement, age 15 years. Damon, a community youth, and Gabe, a returner, were both high school graduates, but previously received special education services under an IEP, similar to the other seven youth who participated in the interviews; all nine youth had received or currently were receiving special education services. Although not queried in the interviews, efforts to identify the youths' charges were made in order to provide context to the discharge planning decisions. These charges varied across participants and ranged from a probation violation or failure to appear, to assault with a deadly weapon (not a firearm), to sex crimes with a child. See Table 1 for detailed demographic information for each youth.

Frank's Story

On Christmas Eve, Frank, a 17 year old minor was released from Central juvenile hall to his mother, wearing an ankle bracelet and assigned to a Probation officer who would monitor him in the field. Frank's mother, Maria, received Frank's discharge plan and a cover letter explaining how the discharge plan "will provide your son or daughter with the tools to integrate and assist in their transition into the community." In the paperwork, she had contact information for Frank's last school of attendance, his Probation officer, attorney, and his Regional Center caseworker; information about what Frank needed to do for Probation, Mental Health, LACOE, health services, and a little information on caregiver's needs; Frank's answers to questions about his education, what he does in the community, and his personal life; a list of services in the community that might benefit Frank, Regional Center services he is entitled to receive, and information about challenges he had while he was detained. Maria took the discharge plan, and mother and son went home happy to enjoy the holidays together. In early January after the winter vacation, Frank's mother re-enrolled him in the non-public school for students with special needs that he attended prior to his detention in Central. Each morning, Frank's mother would wake him up to get ready for school, and before he could leave, Frank called his Probation officer to tell him he was leaving for school; he repeated the same call upon his return. After school, Frank did his "work, watch TV, and that's it." Although he is a Regional Center client, Frank did not get Regional Center services when he returned to the community due to appointments being scheduled during the day when he had to be at school. Part of Frank's probation conditions included daily attendance at school, so Frank wanted his "school stuff to look good" in order to show the judge he was trying. Additionally, Frank didn't receive any mental health support, although it was listed as a community support in the discharge plan.

Despite believing that individual therapy "might help me stay outta here probably," Frank did not mention that he wanted individual therapy to his mother or his Probation officer. Having no other programming or community supports except school, Frank returned to detention in May, only 4 months after being released.

Frank is one of the seven minors I interviewed after his return IHTP meeting to Central. I selected his case for highlight because he represents a typical male youth with developmental disabilities, identified as a Regional Center client, who is not involved in gangs, and who lives in Central's regular housing unit for youth with developmental disabilities. Unfortunately, it also describes what happens as a youth discharges from Central, returns home on probation (HOP), and lacks a set of coordinated transition activities within an outcome oriented process to support his discharge and integration back into community.

Coordinated Transition Services

Griller-Clark (2004) offers a definition of coordinated transition services for juvenile offenders with disabilities that includes a set of coordinated activities (i.e., education, vocational training, employment, independent living, and community participation) within an outcome-oriented process, and promotes successful movement to and from the detention facility. Each element of this definition of coordinated transition services, an outcome-oriented process, and a set of coordinated activities in education, vocational training, employment, and independent living or community participation, was examined in the three different data sources. In general, results show that although there was collaboration among the different agencies through the monthly planning meetings within the facility, staff reported no involvement with discharge

planning, and as youth discharged, collaborative roles were unclear, with uncoordinated activities, or no activities at all. Programs and services were listed on the discharge plan with no clarity on the process, or the priority for enrolling in particular activities. However, differences emerged between youth who discharged home on probation (HOP) and those who discharged to placement. Youth transitioning from Central to suitable placement had coordinated activities in the appropriate areas because they were part of standard programming in the placement, whereas youth transitioning back to the community lacked appropriate services. The next sections will describe the ways in which the process of discharge planning addressed the educational activities, vocational activities, and other services received and not received by youth who returned to the facility from HOP or suitable placement.

Educational planning

The education needs for the youth were always documented on the discharge plans. The discharge plan included a place to indicate the educational supports the minor will need in the community. Although all nine youth interviewed were special education students with IEPs, their written discharge plans were very vague and included similar variations of the following statement: *Continue to attend school daily completing all assignments and passing all subjects working toward graduating high school. Keep current with IEP and services offered.* No indication of the type of special education placement, resource or special day class, or the type of services, such as a behavior support plan or counseling the youth might need was documented in the discharge plan. In fact, when the four school psychologists involved in the IHTP planning meetings were questioned about their involvement in discharge plan development, they reported conflicting messages. Two of the four school psychologists reported no involvement in

developing the discharge plan, despite participating in monthly IHTP meetings where the discharge plan was discussed. Another psychologist assigned to the developmental disabilities unit, RS, knew that the discharge plan was reviewed each month at these monthly planning meetings, but also acknowledged very little involvement with the revision and overall implementation of the discharge plan. Instead, this psychologist informed me that the juvenile hall school had its own process for assisting youth transition back to the community, through the support of a specialized transition counselor who is charged with helping youth get back into school. However, this school psychologist reported little knowledge about what exactly the transition counselor did:

I know we have a transition counselor here. That's always been sort of a concern of mine, just because we have a transition counselor here who follows the students once they leave and helps them get back into their school. Especially if they're having trouble getting back into their school. But I don't know a whole lot about that. I don't know a whole lot about what happens when they leave here, especially when they go home. It's a little bit easier when they go to placement. It's a little bit more organized, but I'm not sure how that's implemented on our behalf after they leave.

It should also be noted that in four years of observing Central's program for minors with developmental disabilities, the research team never met or saw the LACOE transition counselor. This school employee was not involved in Probation's program for youth with developmental disabilities, and never appeared at any of the IHTP and discharge planning meetings for these youth.

While education supports in the written discharge plan were vague, and school staff reported limited to no involvement in discharge planning, the experiences of the youth support the lack of coordinated services in educational activities, particularly for youth who returned home on probation. As stated by the school psychologist, educational supports were easiest for youth in placement who transitioned to programs that included on-site non-public schools, and other supports to get youth enrolled in continuation or other community schools with little to no delay. All four of the nine youth who went to suitable placement were immediately enrolled in school, waiting at most, 2 days to begin classes. Among youth returning home on probation, all five experienced some delay in educational engagement; two youth were released from detention during school breaks or vacations, and one youth experienced a delay of 2-3 weeks due to school counselor pushback:

It took like uh, pretty much like 2 weeks, for [school] to start me, 'cause like the counselor was unhappy about knowing that I was on [community detention program].

And she didn't want to take me back. She thought I was like an influence to the school.

And I felt really bad.

This youth reported that the probation officer was a vital person for convincing the counselor to allow her to enroll in the school. Two youth experienced significant educational delays upon their return to the community. One youth attended school for only 2 days in a month and a half, and the last youth who went home on probation, never enrolled in school in the four months he remained in the community. When I asked why he never enrolled in school, the youth said that his mom "didn't know if probational center was supposed to help get me in school, or was she supposed to do it." Clearly, for youth who returned home on probation, more supports, and

specifically a person who could facilitate school enrollment for those parents who experienced difficulties, was needed to ensure these youth were engaged in educational activities without delay.

Vocational training and employment

Although the definition for coordinated transition services includes activities in vocational training and employment, Probation's *Directive* for serving youth with developmental disabilities does not explicitly address a youth's need for vocational or career preparation. Accordingly, in review of the written discharge plans, there is no place to specifically indicate activities in vocational training or integrated employment. However, during IHTP and discharge planning meetings, the interdisciplinary team often discussed internship opportunities for youth who were discharging. One mental health staff person who was responsible for assisting youth transition to the community reported information about programs such as an internship at the LA county coroner's office, working with animals, a firefighter's training program, among others. While a small selection of programs was offered to youth if the team agreed that the vocational training program would be beneficial and an actual possibility given the youth's legal circumstances, other agency representatives remained quiet during this discussion of vocational training and employment opportunities, relying exclusively on the representative from mental health who focused on connecting youth to programs upon discharge. In an interview with this staff person, he reported how he must "dig and look into their cases, and find out where they're at, what the crime is, because you know, the crime determines the services" Given the youth's particular crime, individualized vocational recommendations were made, and these recommendations were recorded in the *Other* section of the discharge plan as possible programs

that would benefit the youth upon discharge. However, no explicit information was included about how to actually go about getting the youth started in the program, or who to contact for more information or to assist with enrollment. Additionally, without a dedicated section for recording vocational training or employment information, these recommendations were visually lost on the written discharge plan, appearing as just one program in a list of many after Probation, mental health, education, and health supports were prioritized.

While youth were in detention at Central, if they were a student with an IEP, and in a special day class (SDC) placement, these youth received a program in career/tech education, Paxton Patterson; however, this program was only available to youth in this particular type of class. While youth in SDC placement represent minors with the most need, it could reasonably be argued that all detained youth in the developmental disabilities program, whether in SDC or resource classes, or without an IEP altogether, would benefit from such vocational instruction. When asked specifically about unit programming in detention, one Probation staff praised this program as being beneficial to the youth:

I know they like the Paxton Patterson sometimes the kids who, you know, get it. I think it's a good variety for them. Because a lot of them have never been exposed to that. Some of them don't even know how to read or tell time so once they're here, you know, they enjoy it because it's new.

This staff's comment highlights the need and benefits of vocational training, as well as the inequitable access to such training within the hall. This same inequality was experienced by youth upon discharge, with youth in suitable placement, reporting access to vocational training

through their placement programming; youth returning home on probation only received these experiences in special education classes and special schools, if they were enrolled in school.

To substantiate the provision or lack of vocational training and employment experiences, all youth were asked about their vocational experiences upon discharge. None of the seven returning youth were engaged in vocational training prior to their return to Central. One youth's attorney, who was very vocal and forthcoming about the discharge planning meetings with Probation and Regional Center, reported that despite services and programs being requested by the youth and attorney, the actual services never started due to confusion about which agency was responsible for providing the service:

I think that Probation, when Regional Center is onboard, not that Probation does that much to begin with anyway, but it's almost as if the ball is completely dropped by Probation once the Regional Center is there. The Probation officer was present at the [annual Regional Center planning meeting], you know, but I think that sometimes this happens, I've seen this over and over, that when there's more than one agency involved, both of them sort of count on the other one to take care of things. And I don't know what the MOU states is Probation's responsibilities here, but it was basically left to the Regional Center to do all of the job training or vocational stuff, and so I don't think that any of that got done.

These same differences by disposition were evident in the vocational experiences of the community youth as well. Among the two community youth, Blair, the youth who went to suitable placement, had vocational training and employment opportunities within the placement,

working in the kitchen and in the main office performing janitorial tasks. He also had transition services and vocational training written into his IEP, so he spent half his day taking classes at the non-public school within the placement, and the other half of his day in classes at the local public high school taking construction tech classes and physical education. For Damon, who returned home on probation, his vocational training was virtually non-existent, reporting that he worked for only two days at a retail store, through a work experience program offered through his continuation school. Employment experiences were provided to him through family connections where he worked with his older brother installing fences. However, as was commonly reported among the four youth in the sample with vocational experience, this employment was often before the youth could legally obtain a work permit (i.e., not of the proper age, or grades/school attendance was not sufficient to obtain a work permit), and the work was temporary, lasting anywhere from one day to a few months.

Independent living and community participation

Activities in independent living and recreation are important for youth with developmental disabilities to be able to function in society in meaningful ways. Again, similar to the lack of focus on vocational training and employment, Probation's discharge planning process did not explicitly address a minor's need for independent living skills training.

Similar results were found for recreational activities. Youth in suitable placement engaged in recreational activities through their placements' activities and programs, as well as school activities. A surprising result from the five youth who discharged home on probation was the advice given to them by their probation officers. Overwhelmingly, all youth reported that

their POs told them to go to school, but outside of school attendance, Probation officers told youth to "stay outta trouble," "just stay home," or "just go to school and that's it." Youth were not encouraged to engage in the community or recreational activities, and instead were advised to focus only on school, or educational activities.

Outcome oriented process

A final key element of coordinated transition services concerns the design of activities and programming within an outcome-oriented process, requiring actual youth outcomes to be tracked. While Probation tracks some outcomes related to the transition of youth, meaningful outcomes that are tied directly to the discharge plan were not tracked. Some of the data tracked by Probation and related to the discharge process of youth with developmental disabilities included the date of release, name of placement, Regional Center eligibility, changes in placement, youth who leave placement without official permission (i.e. AWOL), arrests, charges, probation violations, among other data. However, none of these data revealed whether or not a youth actually continued his anger management, or drug abuse program, or started the internship with the coroner's office once he was released from detention. The lack of this specific knowledge about the linkage to services upon release made many staff across the agencies question the effectiveness of discharge planning. Staff made comments about the discharge process explaining that "the discharge plan is provided to a number of folks, but what really happens? I can say nothing about that. ... I have great faith that these organizations and individuals are following through, or attempting to follow through." When asked about revisions to the discharge plan, one mental health clinician also talked about the lack of outcomes when he

mentioned how discharge planning needs input from the field probation officer or mental health case manager who has presumably worked with the minor:

The discharge plan, I think, what we need to have more is our case management or the probation officer, the person or the DCSF worker. So the primary, we call it a fixed point of responsibility, a person who's kinda gonna be in charge after. See, we're here and we're providing services here but we're not gonna be providing services after but we do the linkage or at least we collaborate, so we can be throwing all kinds of ideas out there, oh they could ... benefit from [family support], wrap-around, all right, but we don't know who's gonna be the primary person that's gonna be doing it or being... doing the linkage, so I think there's... they could be like... I don't know what the outcome is.

This clinician's comment about how others might wonder what outcomes these youth are having upon discharge is echoed by other members of the team. One Probation staff person directly questioned the relevance of the *Directive* and discharge planning due to the lack of feedback received about the linkage to services:

I would love to see, okay, did they actually go through with it; what the minor says: 'Uh, that program sucks,' because right now, we're referring minors; but we don't have feedback on that. So, some days, I feel like, okay, I'm just pushing papers without that actual feedback; because we do these meetings over and over, and they become really repetitive. Without that feedback, I don't know if it's even worth it.

From the interviews, the results clearly showed that very little information about effective programs and services for these youth gets looped back into discharge planning in the halls. Staff

reported that "our tracking log ... does not go into detail on exactly what services on, you know, on our tracking log; it's basically tracking movement." The type of data being tracked by Probation related specifically to the movement of these youth (e.g., to and from juvenile hall, between placements, etc.), but not to the community supports recommended in their discharge plans, thus preventing a focus on meaningful outcomes to assist these youth in their transitions, or to assist the team in discharge planning.

Self-Determination

The five elements of self-determination (Field & Hoffman, 1994), knowing self, valuing self, planning, acting, experiencing outcomes and learning, was evident throughout various steps of the discharge planning process with mixed results. The process of discharge planning fostered some knowledge and value of self for the youth, however, due to the restricted setting of the facility and the team's inability to develop measurable goals, youth efforts at planning, acting, experiencing and learning from outcomes were greatly hindered.

Knowing and valuing self

The process of discharge planning, which began within three days of entrance to the detention facility supported the youth's knowledge of self by having a Probation staff ask the youth questions in order to complete the written discharge plan. These nine questions covered the three areas of education, community, and personal, and included the following: *When you are at school, what are you good at and what do you like to do? Why do you think you get in trouble in the first place, what makes it hard for you to stay out of trouble? What are your goals for the future? What help do you need to achieve these goals?* In the youth interview protocol, I asked

many of these same or similar questions including: *What are your goals in life (e.g., school, career, living arrangements, family, etc.)? Why are these goals important to you? How will you reach your goals? Is there anything you think might keep you from reaching any of your goals?* All but one youth had responses to things they liked and disliked as well as what they wanted to do in life, and these responses matched what had been documented in their written discharge plans.

In addition to the questions on the discharge plan, I observed several planning meetings where minors were encouraged to add to and revise their interests, likes and dislikes. During these meetings, Probation staff read the likes, dislikes, and long term goal as documented the prior month. The youth was then given an opportunity to add to or change any of the responses; however, when youth were quiet, staff made a conscious effort to comment on the improvements or strengths they saw in the minor, and engage the minor in conversation about his/her strengths and future goals. These efforts at fostering self-determination, in particular knowing self and valuing self, were evident in the written discharge plans, the observed discharge planning meetings, as well as the youth interviews. Whether the youth was returning to detention or in the community, they had goals and deeper values that inspired their goal setting. One returning youth who said he wants to "probably [be] a engineer" or a videographer, indicated deeper values of making himself and his family proud, not being a disappointment to his mother, and not letting his mother suffer the pain of losing a child:

Because I wanna (sigh), it's a better future for me. I see my other friends. They in jail, doing life. Or doing death. Going to jail for the rest of your life. You can't see your kids, they can't see they daddy, none of that stuff. I wanna make something for my life. I don't

wanna end in three places: dead, in a wheelchair, or in jail doing life. I don't wanna do it. I wanna do something for my life. Make my people proud. Proud of me. With her son, my mom gave me, she brought me in the world to make something up. She don't want me like, 5 minutes later, yo' son just got dead, or somebody shot yo' son. I don't wanna hear that. I want something for my parents and for me. And that's it.

This youth had a clear purpose and desire to improve, despite returning to the detention facility. However, although he could articulate his likes, dislikes, and purpose for his long term goals, the youth could not articulate a plan for achieving his goals. This was common among the youth returning to the facility as will be discussed in the following section.

Planning and acting

Self-determined individuals must be able to plan which includes setting goals, anticipating their results, and visually rehearsing. In order to act on his plans, one must take risks, communicate, access resources, negotiate, and deal with conflict and/or criticism. Although the minors could articulate their skills and interests and why they wanted to be successful, some had difficulty articulating plans for achieving their goals. This inability to articulate steps to achieving their goals was most evident in the returning youth. When asked how they will reach their goals, many returning youth replied "just do the same thing I'm doing right now," "just keep doing good," "finish and go to college and get a degree - high school diploma or something like that." These vague and, in the case of the last response, misguided ideas of what the minor needs to do to accomplish his goals should be viewed in the context of the youths' opportunities to engage in goal setting, a key element of planning for success.

However, within the larger evaluation of the program for youth with developmental disabilities, a major finding from the study included the lack of measurable goals in the IHTP planning meetings (Herz et al., 2016). Each month when the team convened to update the IHTP and discharge plan, the team reviewed the prior month's goals in the areas of Probation, mental health, education, and health, representing the four agencies involved in the collaboration. Sample monthly goals included: "Follow all unit and staff instructions. Participate in program without incident;" "Continue to receive weekly mental health sessions;" "Work on keeping himself safe, refraining from self-injurious behavior, and reducing physical aggression;" "Attend school daily participating and completing work assignments, and participate in DIS (Designated Instructional Services) counseling;" and "Continue to be compliant with medication, and provide medical support when needed." It is clear from these goals that the team did not themselves know how to effectively write measurable monthly goals, and thus were unable to assist the youth in effective goal setting. Additionally, as these goals were written and developed by adults, the youth themselves did not have practice developing their own goals. This issue will be discussed further in the section on disability-specific considerations.

Experience outcomes and learn

The last steps of self-determination require a person to experience the actual outcomes as compared to the expected outcomes from the planning stage, and to learn from those experiences. Both returning youth and community youth reported learning from their experiences, but these learning opportunities were not provided by Probation's process itself. While Probation's discharge planning procedures facilitated the self-discovery process by having youth answer questions about their likes, dislikes, and values, other aspects of self-determination,

namely the opportunities to plan and act on those plans, were hindered within the discharge process. Youth did not have direct experiences with goal setting for themselves, and did not visually rehearse or anticipate outcomes, so when they acted, they often acted in ways that were detrimental to their cases, resulting in their return to detention. Some of the returning youth commented on lessons learned from their actions on the “outs,” and reported how they would change their behavior in future situations. They told stories of negative learning experiences that come from running away from placement, or not listening to a parent while home on probation. One returning youth commented about how life had changed on the outs when he went AWOL, and how that experience affected him:

It's time to change. I can't be doing this for the rest of my life. It's dumb. Like when I had AWOL'd too, like nothing was the same no more. When I was out, everybody changed and stuff, so like when I was out I felt like it was dumb already, why am I gonna keep doing this?

This youth experienced outcomes, but unfortunately, without the prerequisite goal setting and anticipation of realistic and likely outcomes, this youth learned his lesson through negative experiences that will continue to impact his legal situation. Another youth, when asked what could have assisted her in staying in the community longer, reported that "perspective" would have helped her realize earlier that her mother was the only person there for her. This minor continued commenting on her newly found perspective saying, "Now I know that next time she gives me advice I really should take a lot more in mind of what she says cause she only says it cause she cares. She's the only one who really did care." Her comment revealed the learning and

assessment that took place after experiencing the negative outcomes of the combination of drug addiction, gang life, and sexual abuse.

Although there were only two community youth, both of them reported significantly more instances of self-determined behavior and self-awareness than youth who returned to detention. To illustrate this difference, Damon, an 18 year old who was interviewed 3 months prior to his high school graduation, discussed several of his values, the goals he had set with his mental health clinician, and his plans for the future. When discussing his motivation for change, Damon describes the visual rehearsal he did while in detention:

The kids, seeing the kids in there and stuff, and just like, really made me like, man I gotta, I gotta change this. What if I was, a kid, I wouldn't want my kid in here. I've been in this same place. They might send him here, same rules as I was in. Same place. Same rules as I was in. I was a student, and that stuff was running through my mind. What if I come out and have a kid? Would he go to jail? Go to Eastlake? Go to RS? Room 15? Looking at people like, that's the stuff that I was really thinking of, like man, like I don't want my kid to be in here. I don't want to be in here.

This motivation to change fueled his actions on the outs. The visual of his hypothetical child being in the same detention facility where he spent four months of his life was a strong motivating factor for positive change. Another example of self-determined action was his desire to graduate high school on the outs instead of earning his diploma in detention. Explaining various reasons for his opinions, including the lower units required for graduation in the facility and future job opportunities, Damon explained that although he did his schoolwork in the

facility, "it wasn't like as [he came] home, and on the outs when [he] was focused on [his] work." Damon had a plan based on his visualizations for the future (e.g., limited future job opportunities with a diploma from the facility school), acted on that plan (e.g., performed the basic requirements while detained, but increased school efforts on the outs), and in his reflection and assessment after graduating high school (i.e., experience outcomes and learn), Damon stated in his interview, "It took me a minute to like, it took me a while to get through school, but I finished it and that's why I'm happy. And that's just like man, I finished school." According to his self-assessment, the time taken to complete school was worth achieving his ultimate goal.

Disability Specific Concerns

Frank's story from the beginning of this chapter, depicts a youth identified with a developmental disability, discharged from detention and focused on being successful. He went to school each day, and attempted to follow the conditions of his probation. He remembered discussing discharge with his therapist and "some other staff" whose name he could not remember, but he knew that he had to follow the conditions of probation in order to stay out of detention. However, during his interview, he could not recall his conditions of probation, saying he had to "go to school and get my grades up, ...stay outta trouble, and probably that's it." In fact, when asked who reviewed these conditions with him, he replied that it was his mother who told him what he had to do; the actual written conditions were never given to him. Frank also never received a copy of his discharge plan, so he had no recollection of the community supports needed to assist him in his transition back to community. Without written documentation, Probation relies heavily on the adults in the youth's life to act on the youth's behalf. However, as was the case with Frank, who is approaching adulthood and does not have a conservator who

will be legally responsible for him in adulthood, the shift from adult responsibility to individual (youth) responsibility is imperative for individuals with disabilities. Besides preparing for the transition to adulthood, other disability-specific concerns include the youth's level of understanding or cognition, a youth's belief in his or her own abilities, or personal agency, and the youth's agreement with the discharge recommendations, or buy-in to the community supports plan.

When working with people with disabilities, it is important to know their level of cognition or intelligence in order to determine what they are capable of understanding. The youth identified through Probation's developmental disabilities program not only had the developmental disability to consider, but also irregular educational histories, contributing to their diminished capacities for understanding and limited skills in reading and math. Staff were aware of their limited abilities in understanding, so comments were made about how things were explained to the youth, and how staff took time to talk to the youth. However, although staff attempted to "talk to the kid's level," any written communications pertaining to the youth were between adults, and the youth never received a copy of their paperwork. During the monthly discharge planning meetings, youth entered the room with nothing in their hands, and were offered no paperwork or even meeting agenda of what would be covered. This overreliance on verbal instruction and auditory input, without allowing the youth to have written copies of paperwork or visual supports to follow along, prevented the youth from fully participating in the meeting, and resulted in youth comments such as "I don't know" and "I can't remember" when questioned about the supports that were recommended in the discharge plan. It should be noted here that these responses came from youth who were interviewed immediately after their

meetings, so a period of about 20-30 minutes had lapsed, and they were unable to recall many items that had been discussed in the meeting. During the interview, one youth commented on the actual discharge process from the facility. She recalled someone going over the conditions of probation with her, but she didn't really understand, and signed papers anyway because she was eager to get out of detention:

I didn't really know what was a violation (*laughter*) so I kinda just knew that it was like if I messed up or something like that. So that was it. That was the only part I didn't understand. But like I still put [the ankle bracelet] on though. I was still happy to go back home with that thing on. I didn't know how it worked though.

Clearly, this youth signed paperwork and agreed to meet her conditions of probation, but had no idea of how the ankle bracelet worked, or what her actual conditions of probation required of her.

Despite not fully understanding the discharge process, all youth were optimistic about their ability to be successful in transition to placement or back to the community. Although youth expressed they had some reservations about placement, or their ability to stay sober on the outs, they felt they could meet their conditions of probation and refrain from getting sent back to the facility. When asked if they thought they could follow the discharge plan, which included following up on the community supports and recommendations in the discharge plan, not only did youth automatically equate the discharge plan with the conditions of probation, one youth commented, "Yeah I thought I could do it. 'Cause it was only a month and I thought, 'Aw, it's easy peasy. The month is gonna fly.' And I was gonna be able to do it." As this youth

demonstrates, lack of understanding of the discharge plan, as well as Probation's overreliance on auditory input and memory of these youth, resulted in their unrealistic expectations for success.

The last element to consider pertaining to youth with developmental disabilities, is their buy-in or agreement with the plan. Results from the data show that youth passively participated in the discharge planning process, were unable to recall topics discussed 20-30 minutes after the meeting, and oftentimes did not agree with the recommendations included in the discharge plan. All youth acknowledged the need to continue their schooling on the outs, and most agreed to the individual mental health sessions. However, one youth in particular who had a recent negative experience with wraparound services, commented that she did not agree with the recommendations in her plan, despite not voicing these differences in opinion during the actual planning meeting. In the meeting, the youth sat and listened to the adults in the room who discussed what services she would need on the outs, but immediately after the meeting when I asked during the interview if she agreed with the recommended supports, this youth replied that she didn't want counseling " 'cause I went too many counseling. I went to one [at this place], didn't help me, so. I went to one in [this other place], didn't help me, so." Although the youth would likely benefit from the counseling, she expressed extreme disinterest in participating in counseling in the community, and as such only had an initial meeting with the therapist during her 3 months on the outs.

In addition to disagreements about counseling, another area where youth did not always agree with the supports listed in the discharge plan included their actual placements, if given a suitable placement disposition. Two of the four youth who discharged to suitable placement commented how they did not initially agree with the actual placement to where they were being

sent. One youth was sent to a Regional Center group home that housed only two other youth clients with developmental disabilities. Eventually going AWOL and returning to the facility, this gang-involved youth did not identify with the other minors in the home, and aligned himself with group home staff instead of the other minors. The second minor returned to Central from the community, however, in her interview after the planning meeting where they discussed the new discharge plan, this youth expressed knowledge about the possibility of a secured-facility for placement, and told me how she didn't want that placement:

All I know is there's possibility for Dorothy Kirby which is something about my case. But I really dislike thinking about DK because it's like I've not committed a horrible crime. Like I'm not like that. I'm just another kid who made a mistake by violating her CDP. But I hope I get this much opportunity, and if not I guess I'm just gonna have to complete the sentence.

As this youth recognized, she has little choice as to what her eventual placement will be, but without buy-in from these youth, the likelihood of their successful follow through with the services recommended in their discharge plan was greatly diminished.

In conclusion, results on the consideration of disability-specific implications showed that the process of discharge planning did not acknowledge the cognitive needs of the youth, relying instead on the youth's memory of what transpired during the meeting. Youth were not provided a copy of the written discharge plan, and instead the written plan was provided to the adults in the youth's life. After being reminded of what the community supports were, several youth did not agree with what was recommended. This lack of agreement affected youth buy-in to the plan,

and as a result, many youth did not seek services in the community, or went AWOL from placement because they did not agree with the actual placement to where they were assigned. Lastly, despite their passive engagement in the discharge planning meetings, their lack of understanding of the discharge plan and conditions of probation, the youth were optimistic and believed in their ability to be successful in transitioning back to the community and getting off probation.

DISCUSSION

The Directive is complex in a sense where it's making sure that these kids are not slipping through the cracks in any way. And once these youth have been identified as DD and they go through and they've been accepted as Regional Center clients for placement, once they're at the placement you have the social worker working with the youth, you have the DP of record working with the youth and you'll have the Regional Center in providing supplemental services to this youth. ... And they have a tracker ... that's tracking to make sure that all the services are being provided. So with all those parties working their case this minor's being touched by a lot of different hands into making sure that the services are being met. (Probation Director)

This comment from a director-level Probation staff represented the essence of what people hoped the *Directive* could do for youth with developmental disabilities as they discharged from the detention facility and back into community. It portrays a bird's eye view of how the disparate agencies and systems touch the minor at various points in the process, from juvenile hall detention through discharge to the community. However, despite these best intentions, the data do not support the notion of multiple systems working together to ensure continuous service delivery throughout discharge. In fact, whether or not this occurs remains a mystery due to Probation's current inability to track outcomes on the community supports recommended in the discharge plans. Primarily tracking data on youth movement, Regional Center eligibility, and re-arrest, Probation maintained no data on outcomes related to the service referral or service use as recommended in youths' discharge plans.

Upon examination of current best practices in transition for youth with developmental disabilities, results show that while Probation's policy called for coordinated transition services through a process of interagency collaboration, vital components of the evidence-based practice, such as activities in vocational training and a transition specialist to coordinate activities, were missing from Probation's process of discharge planning. A review of the data showed that while educational activities were explicitly included in discharge planning through the involvement of the school psychologists, and while staff believed in the supposed connection to special education and the IEP and documentation of education needs in the discharge plans, some youth who returned home on probation (HOP) either experienced significant delay in school enrollment or never enrolled at all. Although youth reported that their probation officers asked about school daily or weekly, only one youth reported her probation officer as the person who helped enroll her in school.

As youth discharged from detention where they received weekly individual mental health sessions with a therapist, they were supposed to receive these same services in the community or in placement. Only youth who transitioned to placement received mental health services. Youth returning HOP reported waitlists and other barriers (e.g., transportation), and disagreement with the need for mental health services as reasons for not receiving mental health services in the community. In addition to the lack of mental health services, youth returning HOP lacked vocational training and employment opportunities because these areas were not explicitly addressed in the youths' discharge plans. Although youths' long-term career aspirations were discussed in meetings, and documented in the written plans, goals and supports needed to reach

those goals were vague, and there was confusion about which agency was responsible for providing services such as vocational training and independent living.

It appears that in spite of policy and procedures designed to improve youths' transition from the detention facility, the discharge planning process lacked the vital transition or education and career specialist who would ultimately be the responsible person for connecting youth to services and activities (Griller Clark & Unruh, 2010; Hagner, Malloy, Mazzone, Cormier, 2008). It was unclear from the data if the intended coordinator of services and activities across agencies was supposed to be the probation officer; if so, according to the youth perspective, probation officers appeared to be focused solely on school enrollment, and knew little about other supports to assist the youth and family. Findings from this study support other research on the role of probation officers as gateway providers to community supports and treatment (Holloway, Brown, Suman, & Aalsma, 2012). While individual differences among probation officers likely contribute to the differences in outcomes for youth with developmental disabilities, this study was limited in its ability to investigate the role of the probation officer, and relied heavily on youth report to ascertain the relationship between the youth and the probation officer.

Similar to how Probation's discharge planning process incorporated some, but not all the vital components of coordinated transition services, the process only facilitated some aspects of self-determination skills training, namely knowledge of self and values. Youth with developmental disabilities oftentimes lack the skills needed to develop short-term goals based on their long-term visions (Carter et al., 2006). This practice in goal setting and acting on those goals was built into Probation's monthly planning meeting, but results showed that the interdisciplinary team did not develop measurable goals, nor assisted the youth in developing his

own measurable goals, which is actually the preferred method for fostering self-determined behavior. Although the process of discharge planning did not facilitate goal setting and acting on those goals, all youth had the opportunity to experience outcomes and learn, whether the outcomes were positive or negative (i.e., returning back to the facility or remaining in the community). Although youth in Probation's program for juveniles with developmental disabilities were not explicitly given a self-determination curriculum, the process of discharge planning attempted to foster self-determined behavior by cultivating youth's knowledge of self and values, monthly goal development in the planning meetings, and monthly review to reflect on actions in an interdisciplinary context. Again, while well-intentioned, the complex *Directive* as described by the Probation director at the beginning of this chapter, conveys the notion that things are happening to the youth, instead of coming from a self-determined youth.

Coordinated transition services and self-determination skills development are evidence-based practices that facilitate the transition of youth with disabilities, but other considerations for working with this population include the cognitive abilities of these youth, their agreement or buy in with the discharge plan, and their beliefs about their abilities to enact any plans. Some practices showed Probation's move toward disability-specific considerations such as the change in youth questions on the discharge plan to be youth-friendly. The first version of the written discharge plan included the following question about school: *What supports do you have for being successful in school?* This question was changed in subsequent iterations to: *When you are at school, what are you good at and what do you like to do? What is the hardest thing for you at school?* This change in the youth questions on the discharge plan reflected efforts to address the cognitive abilities of the youth, however, other practices in discharge planning demonstrated lack

of understanding of the cognitive abilities of youth with developmental disabilities. Throughout the process of discharge planning, these youth are expected to attend and participate in the planning meetings without any visual supports, relying on auditory input alone. This is difficult for youth with developmental disabilities who oftentimes rely on visual supports and visual strategies for memory, processing, and other cognitive processes. Similar to other research on working memory in youth with developmental disabilities (Kibby, Marks, Morgan, Long, 2004), phonological processing impairments affect these youth, and undoubtedly play a role in their ability to engage in the planning meetings, and recall information and details of the meeting 20-30 minutes after its conclusion.

The last elements to consider when working with youth with developmental disabilities are the youths' buy-in and the youths' beliefs in their abilities to enact the discharge plans. Youth reported agreement with the educational supports listed in the discharge plan, but some expressed disagreement with the type of placement upon discharge, as well as the need for particular types of mental health services. While youth in the study did not always voice their disagreement, they had opportunity to do so through the procedures and practices put in place by Probation (e.g., weekly meetings with staff, participation in planning meetings, etc.). These findings are similar to other findings that report national efforts for obtaining youth buy-in for services in the community, including having the youth review reintegration plans and understand the consequences of non-compliance (Hirschfield, 2014; Hogan et al., 2010). Lastly, the youth's own mindset or belief in his ability to carry out the discharge plan was very high with all youth initially believing they could be successful in getting out and staying out of the juvenile justice system. While youth belief was high, some Probation and school staff reported concerns about

the youth and parent's ability to carry out the discharge plans and follow through with the recommended community supports. This finding is similar to one from focus groups of adult stakeholders involved in a juvenile justice transition program for youth with disabilities who indicated that the greatest barrier to reentry was the youth mindset and their inability to see themselves as successful (Mathur & Griller-Clark, 2014, p.726).

While aspects of each of the three best practices (i.e., coordinated transition services, self-determination, and disability-specific knowledge) were evident in the results from this study, key elements of each practice were missing and are likely influencing these youths' outcomes as they transition to the community. Additionally, differences between youth who went to placement, as compared to youth who went home on probation, hint at the need for a closer look and possibly more supports for youth who are returning home on probation, to families who also have differing levels of need.

Limitations

The findings from this study indicate that some elements of evidence-based and best practices for juveniles with developmental disabilities are incorporated into Probation's collaborative discharge planning practices, while other vital elements, such as activities in vocational training, or career development, a dedicated career and education specialist to coordinate services in the community, opportunities for goal setting, and acting on those goals, were not incorporated into discharge planning practices. However, some study limitations described next, should be taken into consideration.

The context under which the evaluation study was conducted impacted the researchers access to the setting, staff, and opportunities for data collection. The purpose of our involvement in the project was to evaluate the *Directive* policy and its implementation. As such, data were collected as the result of a legal settlement between class counsel and Probation. This meant that our access to staff from other agencies, access to youth in other settings, and access to records maintained by another agency, was granted through Probation. As such, no observations were made of the school or classroom setting, nor of youth in their housing units. While the settlement afforded us certain access to director-level Probation staff, the settlement also restricted our access within the facility to focus solely on the provisions listed in the *Directive*. Additionally, to conduct the staff interviews, permission was secured from Probation, before contact could be made with the staff to schedule the interview. Unfortunately, this process prevented certain staff from being interviewed because although they played a role within observed planning meetings, the people were not listed as collaborators within the DD program, so permission for access to these persons was denied. Unfortunately, the probation officers fell within this class of staff, and therefore, were not allowed to participate in the staff interviews on the discharge process and procedures; only the directors of field supervision and placement supervision were allowed to participate in interviews. Without the voice and perspective of the probation officer, it was difficult to verify the level of activity coordination they were responsible for as youth transitioned back to the community. Research has documented the importance of the probation officer in connecting youth to supports (Holloway et al., 2012), so their missing perspective is a limitation of this study in determining the effectiveness of the discharge plan and the *Directive* policies.

In addition to the lack of probation officer input, another limitation of the current study is the lack of input from the larger community or neighborhoods where transition actually occurs (Abrams & Snyder, 2010). Although all attorneys and three parents participated in their children's interviews, observations and interviews with families and community agency staff for HOP youth, and placement staff for those youth assigned suitable placement, would have made the results stronger by focusing on the multiple dynamic influences of reentry. One factor impacting community reentry is the youth's legal case or charge(s), which directly affects the actual placement where a youth may go upon discharge (e.g., home on probation, or suitable placement). Each youth's legal charge was available in the data provided by Probation, but interviews with Probation officers, placement facilities, and family members would allow for a fuller discussion of the contextual variables that impact the youth's reintegration into the community. However, as this was a case study, the case was bound by the facility, focusing on those procedures that were within the immediate control and purview of Probation.

Although qualitative research allows for small samples, more input from community youth who successfully remained out of the detention for six months or more would have allowed for closer examination of differences between youth who returned to the facility and youth who successfully remained out. Research on recidivism within juvenile justice indicates that six months is a critical point for reducing the likelihood of re-incarceration (Mathur & Griller Clark, 2014), however the six-month criterion proved to be a difficult inclusion factor due to the fact that most youth had their Probation cases terminated within 6 months or returned to detention. This resulted in only six community youth being identified after repeated attempts and a significant time lapse; two of the six participated in interviews. More community youth would

have allowed for further examination of common themes among this subpopulation of youth with developmental disabilities. Additionally, while two females were included in the sample and both of them reported experiences of trauma, an investigation of gender differences, as recommended in the literature (Stickle, Marini, Thomas, 2012; Zabel & Nigro, 2007), may highlight the need for more specific focus on how girls and boys may need different levels of engagement or different services altogether when returning to the community (Friedrich, Raffaele Mendez, Mihalas, 2010).

Lastly, this study did not investigate or question how the youth were being identified with developmental disabilities. This was a major component of the procedures adopted under the *Directive* and is worthy of attention, namely the prompt identification of youth with or suspected of having a developmental disability, but it is also largely out of the scope of this case study of discharge practices. However, this broad term of developmental disability for youth who are in their adolescent years, may not be the most appropriate system of classification when criminal justice literature has already begun to identify the specialized needs of subpopulations within developmental disabilities, such as people on the autism spectrum (King & Murphy, 2014) and people with intellectual disabilities (Uzieblo, Winter, Vanderfaeillie, Rossi, Magez, 2012). With specific knowledge about the disability characteristics of detained youth (Gagnon & Barber, 2010), Probation's efforts at discharge planning can begin to truly address disability-specific considerations, such as impairments in social communication and interactions in autism, and diminished cognitive functioning in intellectual disabilities.

Implications

Despite the limitations of the current study, an investigation of evidence-based practices in discharge planning for youth with disabilities serves many purposes in establishing areas of future research, and implications for practice and policy. Through multiple data sources collected to inform the intent of the *Directive's* policies and procedures, and evaluate the success of these practices in implementation, this study focuses on how youth with developmental disabilities exited the detention facility and how the new practices incorporated evidence-based practices. In addition to documents and observations, key informants provided their perspectives through one-on-one interviews, including Probation directors, mental health clinicians, school psychologists, and other agency staff involved in the program. This dissertation extends the multiple perspectives on the process of discharge planning to those for whom the discharge process was designed. While some empirical studies have gathered adult stakeholder input or conducted case reviews of youth (Herz et al., 2016; Mathur & Griller-Clark, 2014), others have included the voices of incarcerated and probation non-disabled youth through interviews (Abrams, Shannon, & Sangalang, 2008; Sander, Sharkey, Groomes, Krumholz, Walker, & Hsu, 2011). Adding to the literature containing youth voice, this study goes further by including the voices of incarcerated and formerly incarcerated youth with developmental disabilities who are often/may be viewed as less capable of participating in interviews than their non-disabled juvenile peers. More research that includes the voices of youth with developmental disabilities and helps us understand how they are processing these interventions, will go a long way in furthering social validity and likelihood of success in implementation. While several ethical and methodological considerations are necessary to properly interview this population (Ellem, K., Wilson, J., Chui,

W.H., Knox, M., 2008), it is worth the effort and attention not only to include, but also to prioritize the youths' experiences and interpretations of the community reentry process.

Beyond calling for the need for more research containing the voices of juveniles with developmental disabilities, the results from this study are relevant for immediate changes in practice at the particular detention facility. Such practical changes include the adoption of practices that improve staff's understanding of the purpose of discharge planning and reminds staff of the importance of the procedures. During the course of the study, personnel changes meant that the discharge plan was no longer explicitly covered during monthly planning meetings, resulting in youth having very little knowledge of a discharge plan. With refresher trainings and mandatory training for new positions or promotions, efforts to reduce this slippage will ensure that important pieces of the policy (i.e., discharge planning) are not left for some other agency to implement. Through staff training, other practices such as writing measurable goals, understanding the cognitive needs of youth with developmental disabilities, incorporating positive behavioral strategies, fostering a youth's ability to set goals, among other practices, will likely improve long-term outcomes for youth with developmental disabilities who were discharged from detention under the *Directive*.

Federal laws, such as the Americans with Disabilities Act (ADA) and the Individuals with Disabilities Education Act (IDEA) serve to protect people with disabilities, allowing equitable access to public programs and services, including education and housing. These protections hold true for youth in detention facilities, even though these settings are restricted in their capabilities to provide certain programs (Sheldon-Sherman, 2013). Thus, the *Directive*, based on the threat of a class action lawsuit for violations of ADA, allows Probation to facilitate

access to safe, appropriate programming and housing while youth are detained. While results from this study indicate that discharge planning efforts fall short of best practices, it should be noted that the responsibility does not fall solely to Probation for implementation of services. The *Directive* calls for interagency collaboration because the youth have complex needs and multiple agency involvement is required to provide services to youth and families involved in the juvenile justice system (Gagnon & Barber, 2010). Through the *Directive*, Probation has begun the journey toward improving the quality of care for detained youth with developmental disabilities; through an expanded interdisciplinary approach drawing from special education, juvenile justice, and mental health evidence-based and promising practices for youth with developmental disabilities, we can create policy that addresses the multiple, complex needs of these youth. This study has shown that while policies were designed with aspects of best practices as the foundation, all essential components of the practice must be incorporated for optimum success. The use of coordinated transition services, supported in IDEA, and applied to a juvenile justice context, has research supporting its effectiveness for youth with developmental disabilities (Griller-Clark & Unruh, 2010). However, it is important that our policies include the mechanisms to facilitate the essential elements of the evidence-based practice, including vocational training and employment support, a dedicated transition support person to assist youth and families with the coordination of services, seamless transfer of records, among other practices that have demonstrated effectiveness for successful community reentry for youth with developmental disabilities (Griller-Clark & Unruh, 2010; Hagner et al., 2008; Mathur & Griller-Clark, 2014). Policies and innovative programs that incorporate these best practices will support

the changes necessary for youth success, thereby reducing and preventing recidivism, the ultimate goal of all parties involved.

Recommendations

Given the results of this study, the following recommendations serve as a guide to ensure the intent of Probation's *Directive* to improve the identification, care and treatment, and discharge of youth with developmental disabilities. Through the application of transition evidence-based practices that extend from the beginning of discharge planning (i.e., within 3 days of entrance to the detention facility), through a youth's discharge to suitable placement or return back home with family or other guardian, these suggestions depict ways in which policy can support the innovative practices necessary for Probation to effect change for the youth.

1. Capitalize on the strength of interagency collaboration to deliver a coordinated self-determination curriculum and program of activities across agencies and settings.

The current settlement calls for the collaboration of multiple agencies for habilitating the youth, and many staff report this collaboration as a strength of the process (Herz et al., 2016). Similar to other studies that have adapted a self-determination curriculum for a juvenile detention setting (Houchins, 2002; McDaniel, 2015), a self-determination curriculum could be modified for implementation within Probation's discharge planning process. For instance, a self-determination unit on goal setting could be incorporated into weekly mental health goals, and school goals, which can then serve as baseline information for monthly goal development. Youth can learn how to set appropriate goals, learn how to anticipate timelines for achieving their goals,

and learn how to take more control of personal development goals, given their individual needs and legal circumstances. Including a common curriculum or topics across multiple settings will provide the youth with disabilities with repeated opportunities for learning, and various domains to practice their newly acquired skills (e.g., telling Probation line staff about their likes and dislikes, identifying values and future dreams with their mental health clinicians, asking their Regional Center caseworkers for support to reach goals, etc.).

2. Incorporate vocational skills training through the development of site-based work experience opportunities and community-based work programs.

Youth identified with developmental disabilities need vocational training to prepare them for careers, employment, and the transition to adulthood. While 82 percent of the youth with developmental disabilities at the facility have an IEP and are required to have transition services (Herz et al., 2016), all youth would benefit from vocational training and job skills acquisition (Ameen & Lee, 2012; Bullis & Yovanoff, 2006). Within Probation's juvenile system some youth at other facilities receive vocational preparation, but unfortunately, these opportunities to develop work skills were not present at this particular facility where the youth with developmental disabilities were housed. Some youth have prior vocational experiences, but many youth do not. A systematic way to provide career training either on-site or within the community will allow these youth to gain work skills, gain confidence, and assist them in securing employment after detention. Other juvenile justice systems have created system changes to support work experience programs, such as Project RENEW, which allowed youth to leave the detention facility with a career and education specialist for the purposes of applying and interviewing for jobs in the community (Hagner et al., 2008). These types of innovative

programs and policy changes will undoubtedly create staffing and other custody issues for Probation, but will also greatly improve community reentry outcomes for these youth, who often must pay restitution fees as a condition of probation.

3. Create a meaningful feedback loop that goes beyond compliance.

All staff commented how they had no feedback on how youth fared in the community under the recommendations listed on the discharge plan. Additionally, some staff expressed confusion about their roles in discharge planning, resulting in their belief that they were not involved in discharge planning. However, all staff are involved in assisting these youth transition back to the community. On-going trainings to assess staff knowledge and ensure procedures that are supportive for youth with developmental disabilities would be beneficial. During these trainings, staff could gain skills for positive behavior interventions, learn about different community supports to assist with discharge planning, and inquire about other topics related to youth with developmental disabilities. Innovative programming to fit the needs of staff and youth still in the halls would allow changes in system practices to invite successful youth who discharged from the juvenile facility back to share their stories with currently incarcerated youth and staff alike. It is important for the staff to see that their recommendations on the discharge plan have value and they are not simply pushing paperwork. Youth residing in the juvenile hall could also benefit from hearing the success stories of other youth who were formerly detained. Through systems change (Hagner et al., 2008), policies can be implemented to facilitate practices that will ultimately assist youth with developmental disabilities in visualizing success, motivating them for behavior change, providing work experiences, and connecting them to community supports in the pursuit of reducing recidivism.

Conclusion

The intent of the *Directive* hoped to reduce recidivism by improving the discharge of youth with developmental disabilities as they transitioned back to community or to placement. Mechanisms such as interagency collaboration, individualized monthly planning meetings, and the completion of youth discharge plans contributed to these efforts to improve transition outcomes. However, through analysis of youth and staff interviews, observations, and document review, we see how the discharge planning process fails to integrate coordinated transition services, self-determination skills training, and other aspects of disability awareness such as the cognitive levels of youth, their buy-in to the process, and belief in their own abilities. Elements of these evidence-based and promising practices, such as the integration of a self-determination curriculum across agencies, a collaborative community or site-based vocational preparation program, and the development of a meaningful system of regular feedback for staff and youth, if incorporated, could greatly improve the transitions of the youth, equipping them with the skills to reduce their chances of future juvenile justice involvement.

Figure 1. Conceptual Framework for Evidence-Based Practices in Discharge Planning for Incarcerated Youth with Developmental Disabilities

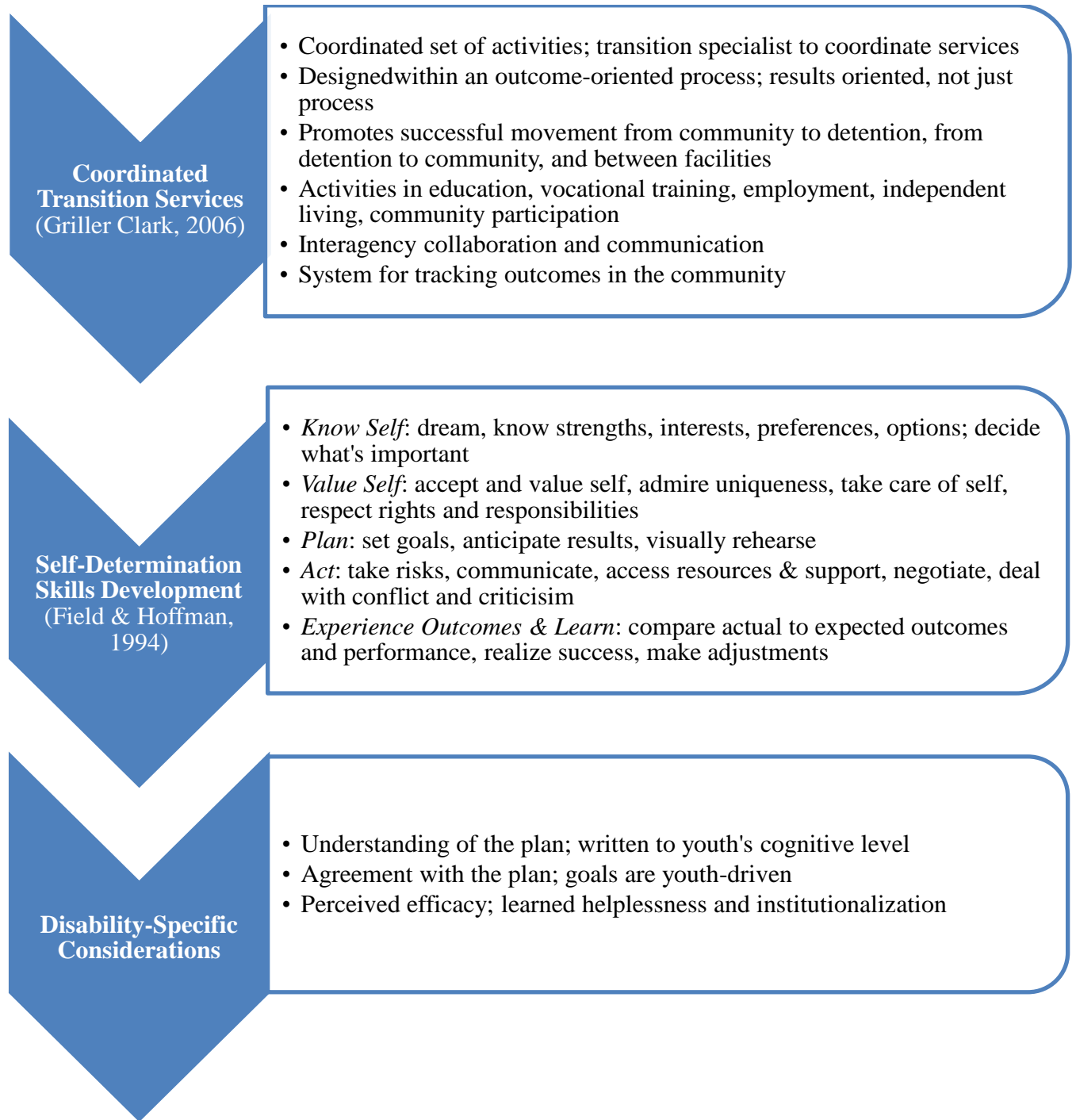


Table 1. Demographics of Youth Participants

Youth*	Age	Gender	Ethnicity	Regional Center Client	Disposition	Gang Involvement	IEP	Grade	Housing Unit	Charge ^a
Returning Youth										
Nate	18	M	White	No	SP	No	Yes	11	RS	Robbery
Keith	16	M	AfAm	Yes	HOP	Yes	Yes	9	PQ	Warrant
Gabe	18	M	Latino	Yes	SP	Yes	Yes	Grad	RS	Assault w/ Deadly Weapon - not a firearm; Great bodily injury
Frank	17	M	Mixed	Yes	HOP	No	Yes	9	RS	Failure to Obey/Probation Violation
Faith	16	F	Latino	Yes	HOP	No	Yes	9	GCARE	Burglary
Chase	14	M	Latino	No	SP	No	Yes	N/A	RS	Placement Runaway
Jennifer	18	F	Mixed	Yes	HOP	Yes	Yes	9/10**	GSHU	Battery on a Peace Officer
Community Youth										
Damon	18	M	AfAm	Yes	HOP	No	Yes	Grad	N/A	Burglary
Blair	15	M	White	Yes	SP	No	Yes	9	N/A	Lewd Acts w/Child

Youth*: All youth names are pseudonyms

Disposition: SP - Suitable Placement; HOP - Home on Probation

Grade: Grade level by credits earned (220 credits needed to graduate); 9/10** - records show youth has only 5 credits, but mom reported 100 additional credits on the outs

Housing assignment within juvenile hall: **RS** - unit for youth with developmental disabilities; **PQ** - Boy's Special Handling Unit;

GCARE - Girls with developmental disabilities with mental health or emotional challenges; **GSHU** - Girls Special Handling Unit

Charge^a: Listed charge is the one associated with the intake date just prior to interview date; youth may have other charges from prior detention dates

Appendix A

Staff Interview Protocol

Juvenile Hall Project – Youth with DD

INTERVIEW QUESTIONS FOR STAFF

A. Development of Documents

1. Which of the following documents are you involved in developing or revising: MDA, IBMP, IHTP, and/or Discharge Plan?
2. What is your role in developing these documents?

For Only DMH Staff

3. What sources of information do you rely on in developing the MDA? How do you obtain this information?
4. What other information do you think would be useful in developing the MDA?

For IBMP/IHTP Coordinator

5. What training have you received regarding writing measurable IBMP and IHTP goals?
6. How comfortable are you in identifying interventions so that youth will attain their IHTP goals?

For All Staff

7. What do you see as your role at the IHTP meetings?
8. What information do you provide about the DD youth?
9. How often do you attend IHTP meetings?
10. How is it determined whether you attend?
11. What sources of information do you rely on in helping to develop/revise the IHTP?
12. What other information do you think would be useful in developing/revising the IHTP?

For staff involved in developing/revising the Discharge Plan

13. What sources of information do you rely on in helping to develop/revise the Discharge Plan?
14. What other information do you think would be useful in developing/revising the Discharge Plan?

For All Staff

15. Do you feel the decision-making process for the IHTP/Discharge Plan is a collaborative

effort? How so?

B. Implementation of Documents

IHTP

16. Are you involved in implementing the IHTP? If so, what is your role? If no, which staff members are involved in its implementation?

For Only Staff Involved in IHTP Implementation

17. On an ongoing basis, do you find it easy or difficult to implement the goals, objectives, and suggestions contained within the IHTP? What makes it easy or difficult to implement?

18. What kind of training did you receive so that you would know how to implement the information contained within the IHTP?

19. What like additional training on implementing the IHTP? If yes, in what areas?

20. If you have questions or concerns about something within the IHTP, whom do you turn to for clarification?

Discharge Plan

21. Are you involved in implementing the Discharge Plan? If yes, in what is your role? If no, which staff members are?

22. What makes it easy or difficult to implement?

C. Strengths/Weaknesses

23. The purpose of the IHTP is to provide DD youth detained in juvenile hall with an integrated, comprehensive plan that provides all treatment, training/educational programs to meet the unique needs of the youth and that are provided by Probation and collaborative partners. The reason for providing this plan is to teach skills to enable the youth with DD to approximate the patterns of everyday living of those without disabilities. Do you think this goal is being accomplished? Why or why not?

24. Reflecting on the process for development of the MDA/IHTP/Discharge Plan, what do you feel are some strengths of this multi-agency process? Weaknesses?

25. Do you have any specific recommendations for improving this process?

D. Integration

26. Which of the following documents do you have access to: MDA, IHTP/Discharge Plan?

27. Is the information provided in the documents you have access to (i.e., MDA, IHTP/Discharge Plan) easily integrated within other agency plans, such as Regional Center referrals/reports, IEP, Mental Health treatment plans, etc.?

Appendix B

Youth Interview Protocol

Questions for Youth Interviews

I'm going to ask you a few questions about the last time you discharged from detention. The interview will be in 3 parts. The first part will ask about the last time you were released from juvenile hall. The second part will ask just a couple of questions about your current plan and the services you receive. And the last part will focus on you: your thoughts, wants, and wishes.

Part 1: Try to think back to the last time you discharged from here to answer these questions:

1. Before you were released from juvenile hall the last time, did someone go over your discharge plan with you? Who? Tell me about that process. Were you given a copy of your discharge plan?
2. Thinking about that conversation when ___ went through your discharge plan, tell me what you thought about the discharge plan. Did you understand it? Agree with it? Plan to follow it? Did you think you'd be **able** to follow it?
3. Did you receive mental health services? If so, what services? How often? Who provided these services?
4. Did you go to school? What school did you go to? How long did it take for you to start school when you left juvenile hall?
5. Do you have an IEP? Tell me about the services on your IEP. Did you get them in school?
6. Are you taking any medication? Did you see a doctor while you were out?
7. Did Probation provide any assistance to you once you left juvenile hall? Tell me about the relationship with your Probation officer.
8. Are you a Regional Center client? Did you access services when you were out? If so, what type of support did Regional Center provide?
9. Did your parents/relatives/guardian get any services to help you stay out of trouble or have a better relationship with you (e.g., family counseling, parent classes, enroll you in recreational program)?
10. What do you think could have helped you make a better transition back to the community, and stay out of juvenile hall?
11. When you were out, was there someone you contacted (or who contacted you) who helped you:
 - a) *Enroll in school*? If so, who was that person? Did you contact him/her? If so, tell me how he/she helped you? What did they do?

- b) *Find a therapist, for either individual sessions or family sessions?* If so, who was that person? Did you contact him/her? If so, tell me how he/she helped you? What did they do?
- c) *Find a job, or enroll in a training program?* If so, who was that person? Did you contact him/her? If so, tell me how he/she helped you? What did they do?
- d) *Make decisions and plans for your future?* (e.g., helping you choose a career, a place to live, or how to avoid trouble) If so, who was that person? Did you contact him/her? If so, tell me how he/she helped you. What did they do?

Okay, now for part 2. We just attended your IHTP meeting where everyone discussed your discharge plan.

- 12. Can you tell me what your current discharge plan says (including community supports)? If so, what does it say? Do you agree with the plan? Why or why not? Do you think you'll be **able** to follow it?
- 13. Has your discharge plan changed since you've last returned to juvenile hall? If so, what is different, and why were those changes made?

Now, for the last part, I want to know more about you:

- 14. What are your goals in life (e.g., school, career, living arrangements, family, etc.)? Why are these goals important to you? How will you reach your goals? Is there anything you think might keep you from reaching any of your goals?
- 15. What are your strengths? What are you good at? What do you think you need to work on to accomplish the goals you have in life?

Question #	Question	Code(s)
1	Before you were released from juvenile hall the last time, did someone go over your discharge plan with you? Who? Were you given a copy of your discharge plan?	CS
2	Thinking about that conversation when ___ went through your discharge plan, tell me what you thought about the discharge plan. Did you understand it? Agree with it? Plan to follow it? Did you think you'd be able to follow it?	DSC, SD
3	Did you receive mental health services? If so, what services? How often? Who provided these services?	CS
4	Did you go to school? If so, what school did you go to and how long did it take for you to start school when you left juvenile hall?	CS
5	Do you have an IEP? If so, what services are on your IEP? Did you get them in school?	CS
6	Are you taking any medication? Did you see a doctor while you were out?	CS
7	Did Probation provide any assistance to you once you left juvenile hall?	CS
8	Are you a Regional Center client? Did they provide any services while you were out this last time? If so, what type of support did Regional Center provide?	CS
9	Did your parents/relatives/guardian get any services to help you stay out of trouble or have a better relationship with you (e.g., family counseling, parent classes, enroll you in programs, etc.)?	CS
10	What do you think could have helped you make a better transition back to the community, and stay out of juvenile hall?	CS, DSC, SD
11	When you were out, was there someone you contacted (or who contacted you) who helped you: a) enroll in school, b) find a	CS

	therapist, c) find a job or enroll in a training program, d) make decision and plans for your future?	
12	Can you tell me what your current discharge plan says (including community supports)? If so, what does it say? Do you agree with the plan? Why or why not? Do you think you'll be able to follow it?	DSC,SD
13	Has your discharge plan changed since you've last returned to juvenile hall? If so, what is different, and why were those changes made?	DSC
14	What are your goals in life (e.g., school, career, living arrangements, family, etc.)? How will you reach your goals? Is there anything you think might keep you from reaching any of your goals?	SD,DSC
15	What are your strengths? What are you good at? What do you think you need to work on to accomplish the goals you have in life?	SD
16	Tell me about 3 things that are important to you, or that you value. Why are those things/ they important to you?	SD

CS -Coordinated Services SD -Self-Determination DSC -Disability-specific considerations

Appendix C

Youth Interview Coding & Data Reduction Scheme

Youth-Interviews - Data Analysis/Reduction

Primary Codes (38)	Secondary Codes (13)	Final Themes (3)
<p>Accessing services on the outs Accountability Advocacy Agreement with transition needs Attempts at self-determination Barriers to services on the outs Daily life (on the outs/in placement) Determined action Disagreement with transition needs Discharge planning Discharge process Education: services, failures, successes Educational history Emotional response to incarceration Feelings Future dreams Goal setting Lack of control Limited understanding</p>	<p><u>Daily Life</u>: Daily life (on the outs/in placement), Feelings, Lack of control, Parent-child relationship, Respect, Services in placement, Services on the outs</p> <p><u>DD Considerations</u>: Advocacy, Agreement with transition needs, Disagreement with transition needs, Feelings, Limited understanding, Motivation, Personal valuation, Transition needs/goals, What would've helped</p> <p><u>Discharge Process & Planning</u>: Discharge planning, Discharge process, Family, Lack of control, Limited understanding, Role of PO, Transition needs/goals</p> <p><u>Education</u>: Education (services, failures, successes), Educational history, Limited understanding, Role of PO, Transition needs/goals, Vocational experiences</p> <p><u>Family</u>: Advocacy, Feelings, Future dreams, Parent actions, Parent-child relationship, Parent services/supports, Role of PO, Services on the outs, Vital person, Vocational experiences, What would've helped</p>	<p><u>Coordinated Services</u>: Daily Life, Discharge Process & Planning, Education, Family, Mental Health Services, Placement, Regional Center, Role of PO, Services on the Outs, Vocational</p> <p><u>Disability-Specific Considerations</u>: DD Considerations, Discharge Process & Planning, Regional Center</p> <p><u>Self-determination</u>: Discharge Process & Planning, Family, Future Dreams, Self-awareness/Self-determination,</p>

<p>Mental health Motivation Parent actions Parent-child relationship Parent services/supports Personal valuation Religion Respect Role of PO Self-awareness Service delay Services in placement Services on the outs Suicide/SIB Transition needs/goals Trauma Vital person Vocational experiences What would've helped</p>	<p><u>Future Dreams:</u> Feelings, Future dreams, Lack of control, Motivation, Parent-child relationship, Respect</p> <p><u>Mental Health Services:</u> Emotional response to incarceration, Feelings, Mental health, Religion, Service delay, Suicide/SIB, Trauma</p> <p><u>Placement:</u> Daily life (in placement), Lack of control, Respect, Role of PO, Services in placement, What would've helped</p> <p><u>Regional Center:</u> Limited understanding, Parent actions, Parent services/supports, Service delay</p> <p><u>Role of probation officer:</u> Respect, Role of PO, Vital person</p> <p><u>Self-Awareness/Self-Determination:</u> Accountability, Advocacy, Attempts at self-determination, Determined action, Emotional response to incarceration, Feelings, Goal setting, Mental health, Motivation, Personal valuation, Respect, Self-awareness, Trauma, Vital person, What would've helped</p> <p><u>Services on the Outs:</u> Accessing services on the outs, Barriers to services on the outs, Limited understanding, Mental health, Personal valuation, Respect, Service delay, Trauma</p> <p><u>Vocational:</u> Motivation, Personal valuation, Self-awareness, Transition needs/goals, Vocational experiences</p>	
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Appendix D

Observation Variables Related to Discharge Planning

IHTP/DP Meeting Observations - Variables for Analysis

Code	Definition	Alignment to EBP
AIPP ¹	Attend in-person (Placement)	CS
APF ¹	Attend in-person (Field)	CS
DIPP	Discrepancy in program participation (e.g., no ART or Paxton/Patterson)	SD, CS
DPMG	Discharge Plan: Missing goals	CS
DPNC	Discharge Plan: No connection to need(s) stated in meeting	DSC
DPSI	Discharge Plan: Supports not appropriately identified/stated	CS, DSC
IAFB	In attendance (Field)	CS
IAP	In attendance (Placement)	CS
LYI ²	Limited youth involvement	SD
MIF	Missing information (Field)	CS
MIPP	Missing information (Placement)	CS
RSDF	Recommend services/discharge programs (Field)	CS
RSDP	Recommends services/discharge programs (Placement)	CS
YII ³	Youth input issues	SD

CS - Coordinated Services; SD - Self-determination; DSC - Disability-specific consideration

¹ These variables represent *exemplary* practices for field and placement officers. The Directive only calls for participation (in person or by phone), and does not require in-person attendance.

² This code applied when the youth was present in the meeting, but had limited verbal participation.

³ This code applied when the youth was not present in the meeting, or when a staff person reported difficulty in gaining input from the youth in completion of forms or processes (e.g., youth wouldn't answer discharge plan questions, youth was not at the IHTP meeting, etc.)

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