Engaging young people in contact with the criminal justice system in drug interventions

Professor Karen Duke
k.duke@mdx.ac.uk

www.eppic-project.eu

@eppic_project

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Background: ‘Engagement’

• Neglected area in youth justice and drugs fields
• Mainly understood from the perspectives of practitioners and professionals
• Youth participation viewed as ethical imperative and fundamental democratic right under the 1989 UN Convention on the Rights of the Child (UNCRC)
• **BUT**: not universally applied in national law and policies, particularly in relation to young people in criminal justice system
• Challenges relating to engagement of ‘involuntary clients’
Definitions of ‘engagement’

Young people’s personal motivation and commitment to involvement in activities. (Mason and Prior, 2008: 12)

Meaningful participative and sustained involvement of a young person in a harm reduction programme. (Paterson and Panessa, 2008: 24)

An increased amount of observable behaviours (enrolment, attendance) and a positive change in attitude toward the reported interventions. (Dunne et al, 2017: 488)
Two levels of ‘engagement’

Operational engagement:
Engagement of the practitioner with the young person to carry out drug interventions. Importance of the relationship. Micro level (Smith et al, 2012)

Organisational engagement:
Eliciting views of young people about what they want & need from services. Shared decision-making. Co-production. Macro, structural level.
Theoretical framework: operational engagement

3 styles of working with young people in contact with the criminal justice system (Smith and Gray, 2018):

1) Offender management model
2) Targeted intervention model
3) Children and young people first model (Case and Haines, 2015)
Theoretical framework: organisational engagement
Hart’s ladder of youth participation

- **But**: youth are not homogeneous
- Exclusion, marginalization & CJS experience shape participation & engagement
- Participation may be more dynamic, unpredictable and dependent on context
Engagement through relationships (operational level)

- Importance of caring, trusting, supportive ‘relationships’ with adults
- Non-judgemental approaches (‘children and young people first model’)

He [the practitioner] started out saying that the glass is full of trust. ‘My confidence in you is 100% and every time you screw up, it will empty a bit’. But others, they say: ‘Here is an empty cup, and you have to prove that I can have faith in you’. But he started with trusting me, and that calmed me. (Young person, Denmark)

They are great because they encourage you...they never tell you, ’you’re a bad person’. (Young person, UK)

My relationship with the social worker is very different... This is because of how she looked at me. She did not look for an ‘addict’. (Young person, Italy)
Importance of the ‘relationship’: addressing complex issues faced by young people

I prefer to see them, instead of placing them in some box or category. I aim to be neutral around their problems with crime. I want to work with it, yes, and it is often closely connected with their drug issues. But you have to focus on the sum rather than the parts. (Practitioner, Denmark)

Their stories are about affective deprivation, losses, and lack of reference points...The work is treatment, the full taking care of the person, and the means is the therapeutic relationship. (Practitioner, Italy)
Importance of lived experience/living experience of drugs & CJS

- Information seen as credible, accurate & relevant
- Use of peer workers/mentors
- Relatability
- Slight resistance from practitioners who stress training required to deal with complex problems

If someone comes in and wants to talk to you about misuse and they don’t look like someone who’s ever tried anything, then you think to yourself, ‘what do you know, then?’...We need those with experience...someone who has been through what we are going through right now, who can relate to us.
(Young person, Denmark)
Collaborative goal setting, control & empowerment

• Young people as active partners in planning. Having control and agency → *young person first model*

• Practitioners require autonomy and flexibility → reject *offender management model*

> These young people will often tell us exactly what they need and how to put it together. If you just follow it and you do what they’re asking you to do, you’ve probably saved yourself half the battle. (Practitioner, UK)
Ability to work with harm reduction approaches

- Flexibility in defining ‘drug prevention’
- Requirement for abstinence = disengagement
- Define ‘safe’ drug use for themselves

It's cool that there is no pressure to end cannabis smoking. When you come for meetings, you don’t have to be abstinent...there is no such coercion. (Young person, Poland)

If we are able to lay the ground and facilitate that they cut down on their use or start thinking differently about it, we are well on our way. (Practitioner, Denmark)
Challenges to engagement: the criminal justice context

- Conflicts between health & criminal justice approaches
- Need for flexibility around goals of interventions
- Confidentiality & information sharing between agencies in some countries
- Prison setting & regime can constrain engagement/therapy

They are wary of criminal justice. They assume that we’re working with the police, or drug enforcement agencies. They can be quite subdued and wary with the workers and with the information that they’re actually telling us. (Practitioner, UK)
Levels of organisational/participatory engagement

• Most interventions fit between Level 4 and Level 6
• Young people involved in collaborative goal setting (but at the individual level)
• Engaging young people in the design and delivery of interventions (co-production) was viewed as difficult

*When they come here, they discover they need to understand what they want. When questioned about what they want to work on or what they want to do, they are not prepared.* (Practitioner, Italy)
Conclusions:

- Trusting, collaborative relationships
- Engaging, effective interventions → ‘young people first model’
- Criminal justice context limits interventions → ‘offender management model’
- Control - Harm Reduction – Creating Goals Collaboratively
- Practitioners need flexibility & autonomy to work ‘with’, rather than ‘on’ young people
- Operational & organisational engagement have the potential to complement & reinforce each other
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