

FAST READ:

Adolescents with communication disorders may run afoul of the authorities due to difficulties with problem-solving, expressive and receptive language, and executive functioning. The problems often start with punitive zero-tolerance policies in schools. The authorities are in need of speech-language pathologists' expertise on this population's unique behaviors and needs.

TAGS: >COMMUNICATION DISORDERS, JUVENILE JUSTICE SYSTEM



JUVENILE



INJUSTICE

Adolescents with communication disorders face an increased risk of being misjudged and detained by the juvenile justice system. Speech-language pathologists can be their key advocates.

BY SHAMEKA STANFORD

JUVENILE INJUSTICE

What started as a regular language arts class for Dylan ended very differently after he got into a disagreement with another student who was teasing him about not being able to read. The argument escalated, with Dylan shoving his desk away, causing it to flip over, and throwing his pencil at the classmate. The classmates and other students laughed at Dylan, who got angrier, kicked another chair across the room, and banged his fist on the desks. The teacher, who reports not actually seeing the initial teasing incident, asked Dylan to calm down, but said she feared for the safety of the kids and herself.

Unable to calm Dylan down, the teacher radioed the assistant principal, who called the police to “de-escalate the situation.” Officers took a handcuffed Dylan to the police station. Eventually, Dylan was referred to the juvenile/family court in his state for a status offense charge of simple assault secondary to school misconduct and being disruptive in the classroom (bit.ly/act4jjstatusoffenses).

What officers didn’t account for and were unaware of was that Dylan has mild–moderate autism spectrum disorder (ASD). This was possibly because of the officers’ limited training in and awareness of neurological and intellectual impairments. For Dylan’s mother, the incident was a painful reminder of how little the disorder is understood by the authorities. “My child has autism, and this is how they handle it?” she said to me, the speech-language pathologist conducting an evaluation of the impact of Dylan’s communication disorders on his actions during the incident.

Dylan’s mother was dismayed that nobody in charge considered how his ASD affects his behavior, despite the fact that he has an IEP for his ASD-related communication challenges. Even though the classroom teacher knew about Dylan’s ASD, her first instinct in the heat of the moment was to stave off perceived danger. She also may not have known a different way to handle the situation. But with adequate training and awareness—or just understanding the intersection between communication disorders and actions that can be considered delinquent and even criminal—the authorities involved could have handled the situation without including the justice system.

ASD and other cognitive and communication disorders (CCDs) can put adolescents like Dylan at increased risk for punishment because authorities may misinterpret their difficulties with problem-solving, expressive and receptive language, and executive functioning. The problems often begin with zero-tolerance policies, in which schools hand down swift and severe punishment—suspension, expulsion or placement in juvenile detention—for student misconduct. More than 80% of young people affected by these policies were found to have a CCD, a learning disability, or some combination of these, according to a 2018 article on CCDs and the school-to-prison pipeline in the *Journal of Gender, Social Policy and the Law* (bit.ly/Stanford_Muhammad2018).

This is where speech-language pathologists—as advocates for people with communication disorders—come in. SLPs are often the first line of contact with youth who have CCDs, particularly in schools. Therefore, we are in a position not only to provide services to these students, but also to educate the courts and justice system on their unique behaviors and needs—and to influence policy and legislative changes affecting them.

SLPs' ROLE

In addition to their effects on behavior, CCDs are also associated

with difficulty thinking critically, recalling information, following verbal directions, and controlling impulsivity. Processing and reasoning skills can also be affected. These challenges increase the odds that a young person with a CCD will be detained by, and confined within, the justice system (see bit.ly/2Ikca5p). As a juvenile forensic SLP, I evaluate these youth and assess how their disorder may have contributed to the charges brought against them. (My research and clinical work focus on CCDs in black youth of low socioeconomic status.)

I provide specialized speech-language pathology forensic assessments and evaluation reports. These documents include my professional opinion and written recommendations on how a youth's cognitive-communication disorder may have had an impact on the youth's decision, behavior, or action that was considered a status offense or crime in youth. Court systems take my written reports into account when they make final decisions on treatment referrals and/or long-term placement (for example, juvenile detention center, psychiatric ward, alternative schools) for youth at risk for delinquency.

But I can't do this work alone. It's important that our profession gets more involved—and leads the way—in work with this population. As it stands, psychologists and forensic social workers are typically

ASD and other cognitive and communication disorders can put adolescents at increased risk for punishment because authorities may misinterpret their difficulties with problem-solving, expressive and receptive language, and executive functioning.

JUVENILE INJUSTICE

It is time to distinguish communication disorders from mental illness in the juvenile justice system—and to bring in more SLPs.

the professionals who address communication disorders among incarcerated youth. It is time to distinguish communication disorders from mental illness in the juvenile justice system—and to bring in more SLPs. This shift will require communication sciences and disorders programs to include more training on incarcerated youth with CCDs (see “Inside Out” on page 51), as well as to conduct more research in this area.

SEEING A NEED

My own work in the juvenile justice system began in 2016, when I analyzed the case of “Tamare,” a black girl with lead poisoning. Tamare’s case came to my attention from a colleague who knew of my research and work and recommended the parents and their lawyer reach out to me. Tamare, a 14-year-old eighth-grader, had been expelled from school due to “behavior problems” and was in and out of juvenile detention. She’d had more than four status offense (SO) charges, which are violations such as running away, being “ungovernable,” drinking, skipping school, or violating a curfew—transgressions not considered

criminal for adults. SO charges are often related to zero-tolerance policies and enforced by school administrators—usually resource officers. Those who issue them tend to make subjective judgments, some research indicates (see bit.ly/Stanford_Muhammad2018).

In this case, Tamare was charged with truancy and being incorrigible. Truancy is defined as an intentional, unjustified, or unauthorized illegal absence from required education. Being incorrigible is defined as unable to be “corrected” or reformed. Before the SO charges, Tamare had shown declining academic progress and difficulty with behavior regulation. More specifically, she demonstrated difficulty with pragmatic skills and impulse control, in that the things she would say were considered inappropriate; social skills; and processing information in the presence of distractors and background noise. But no school personnel had flagged a need to assess her cognitive and communicative abilities. After she was expelled, Tamare’s case social worker, assigned by the family court, found my information online and contacted me to assess Tamare’s

language abilities. Her results demonstrated the following:

- Difficulty with visual and spatial planning, affecting her ability to take in complex information, reason through it, remember it, and reproduce it.
- Problems recalling information, affecting her ability to complete tasks and follow verbal directions.
- Struggles with problem-solving, decision-making, and consequential thinking skills, affecting her ability to process outcomes of her decisions and make better ones.

In my report to the social worker, I noted how these areas of difficulty explained Tamare's problematic functioning in a mainstream academic setting and likely contributed to her behavioral problems. The fault was not Tamare's, I emphasized. The issue was that she had never received speech-language pathology assessment or intervention. I recommended that she receive speech-language treatment addressing the areas of need I'd identified.

My evaluation report proved a key document in her case hearing, in which the judge ultimately decided not to refer her to juvenile detention center confinement. Instead, the judge referred her to a community intervention services diversion

program that required scheduled family counseling, visits with the assigned school psychologist for an evaluation, and a team IEP meeting at the assigned school.

MISDIAGNOSED AND MISUNDERSTOOD

This experience with Tamare launched my clinical and scholarly work as a juvenile forensic SLP. I started by pursuing 200-plus hours of individualized coursework and training in forensic analysis, forensic linguistics, forensic evaluation, criminal justice, juvenile justice law, and special education advocacy. I soon discovered a dearth of research on the juvenile justice system and youth with CCDs, especially those of color. Existing research has focused mainly on identifying CCDs among youth in confinement—not on the disorders' potential contributions to that confinement or the long-term effects of confinement.

Another significant issue to be addressed is mistaken classification of CCDs as mental health disorders. Some research indicates that as many as 70% of youth in juvenile detention facilities have mental health disorders (see bit.ly/2IEtKjO). In the past, some researchers and professionals may—using instruments like the Moller-Murphy Symptom Management Assessment Tool (see bit.ly/murphyandmoller1996)—have identified communication disorders

As a result of misdiagnosis, a significant percentage of incarcerated youth likely have undiagnosed and untreated CCDs. Meanwhile, there is minimal provision of speech-language services in juvenile detention centers.

JUVENILE INJUSTICE

Cognitive-communication challenges increase the odds that a young person with a CCD will be detained by, and confined within, the justice system.

as primary symptoms of mental illnesses. However, although they may co-occur, communication disorders are certainly not the same as mental disorders.

Mental illnesses involve behavioral and mental patterns that cause significant distress or impairment of a person's functioning. A mental disorder is typically defined by how a person behaves, feels, perceives, or thinks. Mental health treatment primarily targets a person's ability to regulate their emotions and behavior through counseling, medication, or a combination of the two. In comparison, as SLPs well know, a communication disorder can affect a person's ability to process and produce speech and language, especially in social discourse.

As a result of misdiagnosis, a significant percentage of incarcerated youth likely have undiagnosed and untreated CCDs. Meanwhile, there is minimal provision of speech-language pathology services in juvenile detention centers. The lack of CCD awareness in these facilities and the courts means youth with these disorders may be grossly misunderstood. For example, a Marshall Project report (see

bit.ly/2IEmGDY) describes how the social difficulties of young people with ASD may put them at higher risk for arrest than their neurotypical peers. The report cites rising numbers of youth with ASD being charged with child pornography; criminal intent is often assumed in these cases, with no consideration given to ASD-related social naiveté.

AN SLP LENS ON 'MISBEHAVIOR'

Trends such as rising arrests of youth with ASD for child pornography (see bit.ly/2GdzKx6) underscore the need for increased involvement of SLPs in juvenile justice. SLPs can, for example, help school authorities distinguish between characteristics of CCDs and behaviors that justify an SO charge. This role requires SLPs to have a thorough understanding of where CCDs might intersect with typical SOs. The following examples illustrate cases in which commonly misunderstood CCD characteristics lead to SO charges:

Running away

In a student with ASD, this could be elopement brought on by sensory overload that the student is unable to describe.

INSIDE OUT: CSD Students Learn Together With Women in Confinement

When it comes to teaching graduate students in communication sciences and disorders about the juvenile justice system, there's no better place to do it than within the system itself.

As part of a semester-long independent study course I teach—called “Inside Out”—seven master’s and doctoral students and seven women incarcerated at the Washington, D.C., Correctional Treatment Facility attend class together.

The course focuses on such core societal communication issues as expressive and receptive communication styles, accents, dialects, and cultural differences in communication, including:

- African-American English versus Standard American English.
- Societal perceptions of accents and dialects.
- Communication breakdowns: Appropriately expressing your wants and needs.

During the final weeks of the course, the group collaborates on a project to address these issues—for example, writing a position statement and essay to support the communication style of an under-represented population who have been over-represented in the criminal justice system.

The course is part of the Inside-Out Prison Exchange Program (www.insideoutcenter.org), which began at Temple University and the Philadelphia Prison System in 1997 and now involves more than 300 university students and 400 men and women who are incarcerated nationwide. The criteria for men and women in carceral spaces to participate vary by university and course instructor requirements, which range from having college-level credits prior to incarceration to expressed interest in the topic being offered that semester. The program

partners universities with correctional systems with the aim of deepening conversations about and transforming approaches to crime and justice.

The program seeks to motivate future clinicians (outside) to create more effective, humane, and restorative interventions to help reduce crime and recidivism. It also challenges people who are incarcerated (inside) to place their life experiences in a larger social context, and to rekindle their intellectual self-confidence and interest in further education. In addition, it encourages them to recognize the ability to strive for academic attainment, educational support, and academic mentorship from college and university professors inside and outside of prison.

Criminology Professor Bahiyah Muhammad introduced the program to Howard University in 2014 in the area of sociology. (She and I conduct research on the critical race theory and the criminal justice system.) Since then, Howard University has added communication sciences and disorders to the other teaching areas traditionally covered by the program, including criminal justice, psychology, religion, and women’s and urban studies.

In the future, I—as the juvenile forensic speech-language pathologist expert within the communication sciences and disorders program—plan to grow this experience into a comprehensive education track for SLPs interested in clinical work with youth placed at-risk for delinquency and criminal recidivism. I also aim to continue to spread knowledge and awareness of the need for SLPs on the frontlines of juvenile justice through training for clinicians and communication disorder programs on how to become more involved.

— SHAMEKA STANFORD



JUVENILE INJUSTICE

More than 80% of young people affected by zero-tolerance policies were found to have a cognitive-communication disorder, a learning disability, or some combination of these.

Defiant behavior (*the most common charge among black girls with CCDs*)

A student with a CCD could struggle to follow directions or remember information, impairing their ability to meet demands and expectations in class. This struggle could be mistaken for disobedience. CCD-related language difficulties could also hamper the student's academic performance, causing embarrassment, frustration, and shame. These responses could be misinterpreted as hostility.

Disruptive/unruly behavior

A student with a CCD may have trouble problem-solving, thinking consequentially, regulating emotions, and controlling impulsivity—all of which can interfere with academic and social engagement. They may also experience CCD-related language difficulties, causing frustration that's misinterpreted as disruptive or unruly behavior.

Truancy

A student with a CCD could lack motivation to attend school because they are experiencing so much frustration and failure due

to the unaddressed cognitive-communication disorder.

Disobeying orders of parents, teachers, or other authorities/ungovernable

A student with a CCD could struggle to attend, follow directions, understand complex information, heed nonverbal cues, and organize thoughts and actions—which authorities could misconstrue as defiance.

WHERE DO WE GO NOW?

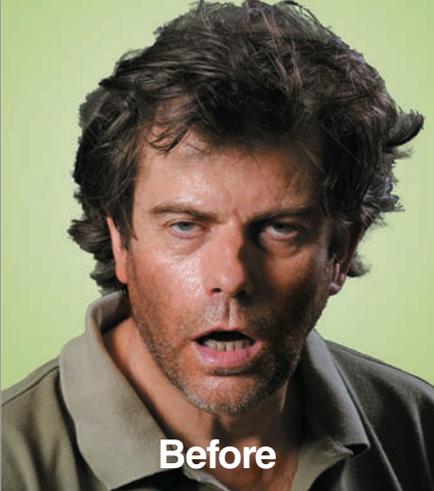
These examples illustrate how desperately SLPs are needed to bolster legal authorities' understanding of CCDs. How can we prepare more SLPs for this work? I recommend that training programs explore adding this information into courses, specialty tracks, and clinical practicums in forensic speech-language pathology and juvenile justice. For instance, I am teaching an independent study course on this topic to Howard University communication sciences and disorders graduate students at the Washington, D.C., Correctional Treatment Facility (see "Inside Out" on page 51).

It is also critical to raise state and federal legislators' awareness of CCDs' role in juvenile incarceration. More research is needed to better understand the incidence, impact, and intervention needs of children with CCDs in the juvenile justice system. Because of such efforts, I am hopeful that the legal authorities increasingly recognize the expertise and value of SLPs as key participants in juvenile justice proceedings. 🗨️

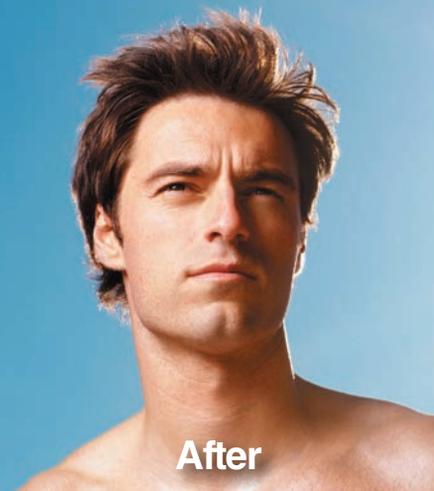
Shameka Stanford, PhD, CCC-SLP, is an assistant professor in the Communication Sciences and Disorders Department at Howard University in Washington, D.C. She has more than 10 years of clinical experience working with youth placed at-risk for delinquency in group homes, public and charter schools, and alternative schools. She is an affiliate of ASHA Special Interest Group 1, Language Learning and Education. shameka.n.johnson@howard.edu

» Find sources for this article at leader.pubs.asha.org.

HOW DOES YOUR PRIVATE PRACTICE LOOK?



Before



After

“ I've been using **Practice Perfect EMR** for 6 months
and look at me now!”

-  **Billing + Scheduling**
-  **Documentation/EMR**

-  **Business Growth Tools**
-  **MIPS Ready**

\$170
PER MONTH

No Long-Term Contract
No Up-Front Costs



Get your practice in shape.
Book your demo today:
877.510.7473 | www.practiceperfectemr.com



practice perfect
EMR + Management Software



“ I liked the flexibility of having access to so many sessions and live chats. At times, I felt like I was at an ‘in-person’ conference. What fun! ”

YOU'LL LOVE OUR ONLINE CONFERENCES

Get the guidance you need to be at your best! Access comprehensive, “apply-immediately” information on a variety of topics – anytime, anywhere.

Visit www.asha.org/events for a full list of online conferences.

* Quote provided by an ASHA online conference participant.

21823A

Sources

ACT4JuvenileJustice. (2014, August). Status Offenses and the JJDPFA Fact Sheet. Retrieved March 21, 2019, from www.act4jj.org/resources

Bryan, K., Freer, J., & Furlong, C. (2007) Language and communication difficulties in juvenile offenders. *International Journal of Language & Communication Disorders*, 42(5), 505–520.

Murphy, M. F., & Moller, M. D. (1993, August 7). Relapse management in neurobiological disorders: The Moller-Murphy Symptom Management Assessment Tool. Retrieved March 15, 2019, from www.ncbi.nlm.nih.gov/pubmed/8239726

National Center for Mental Health and Juvenile Justice. (2014, January/February). Better Solutions for Youth with Mental Health Needs in the Juvenile Justice System. Retrieved March/April, 2019, from csgjusticecenter.org/mental-health/publications

Robison, J. E. (2013, August 6). Autism and Porn: A Problem No One Talks About. Retrieved April 15, 2019, from www.psychologytoday.com/us/blog/my-life-aspergers/201308/autism-and-porn-problem-no-one-talks-about

Stanford, S. N., & Muhammad, B. (2018, August). The confluence of language and learning disorders and the school-to-prison pipeline among minority students of color: A critical race theory. *American University Journal of Gender, Social Policy, and the Law*. <http://www.jgspl.org/wp-content/uploads/2018/08/the-confluence-of-language-and-learning-disorders-and-the-school-to-prison-pipeline-among-minority-students-of-color-a-critical-race-theory.pdf>