Juvenile Delinquency: An Investigation of Risk Factors and Solutions.

Lauren Cardoso
Salve Regina University, xoxladylauxox@aol.com

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Introduction:

The public policy of this state [Rhode Island] is: to protect children whose health and welfare may be adversely affected through injury and neglect; to strengthen the family and to make the home safe for children by enhancing the parental capacity for good child care; to provide a temporary or permanent nurturing and safe environment for children when necessary; and, for these purposes, to require the mandatory reporting of known or suspected child abuse and neglect, investigation of those reports by a social agency, and provision of services, where needed, to the child and family (RI 40-11-1).

Educational and community based programs, both inside and outside the Rhode Island Training School, can help juveniles stay away from crime and prevent recidivism. The key to making these programs successful is to target the factors that place juveniles at risk. There have been multiple research studies regarding what these risk factors are, and now the focus needs to be implementing programs that address these risk factors associated with juvenile delinquency. Analyzing nationwide and state statistics, the risk factors, and testimonies from administrators of current programs will provide detailed insight into the types of interventions that are needed for juveniles who have committed crime or are at risk and on the path towards delinquency.
Delinquency Facts and Statistics:

Juvenile delinquency is defined as, “…a violation of Federal law committed by a person prior to age eighteen which would have been a crime if committed by an adult” (Scalia, 1997). In 1995, one hundred and twenty-two juveniles within the country were adjudicated, heard and settled in court, as delinquent in the Federal courts. This number is lower than expected because it only refers to offenses that would be charged federally rather than in state courts. The crimes committed most often were drug offenses (forty-seven percent). Of the one hundred and twenty-two juveniles adjudicated delinquent, thirty-seven percent went to a correctional facility and fifty-nine percent were placed on probation (Scalia, 1997, p.1).

In the state systems during the same year, there were about one and a half million delinquency cases. About eight hundred and fifty-five thousand were processed in the juvenile justice system. Half of those processed were charged with property offenses and only nine percent were charged with drug offenses. Twenty-nine percent of those processed were sent to correctional or residential facilities, and fifty-six percent were sentenced to probation (Scalia, 1997).

The federal number of adjudicated juveniles is drastically less than that of the state amount because federal systems only accept cases in which there is a substantial federal interest in the case. In addition, a juvenile is adjudicated within the federal system if the state does not have jurisdiction, refuses to assume jurisdiction, or if the state does not have appropriate services for the offender (Scalia, 1997).

Once juveniles are adjudicated in Rhode Island the court places them in the Rhode Island Training School, sentences them to probation, or gives them community service depending on
the level of the offense they commit. The more serious the offense, the more likely the child is going to be sent to the Training School. In the year 2008, almost half of the juvenile delinquents in the Rhode Island Training School were between the ages of sixteen and seventeen. When statistics from this year were broken down by race, it was found that approximately forty-four percent were white. The offenses that were most frequent were property crimes, disorderly conduct, status offenses, and simple assault (Juvenile Justice in Rhode Island, 2008). Within the past few years, the number of juveniles being placed in residential facilities is decreasing overall in Rhode Island. In 1997, there were a total of four-hundred and twenty-six juveniles in residential facilities. As of 2010, this number has decreased to two-hundred and forty-nine. Taking this into consideration reveals that the seriousness of juvenile crime is decreasing. In addition, Rhode Island is doing well when compared to the rest of the country also. For example, in Rhode Island, forty percent of the juveniles are in public facilities and sixty percent are in private facilities. On the other hand, sixty-nine percent are in public facilities and thirty-one percent are in private facilities. Those who have committed more serious offenses are placed in public facilities; therefore, the decreasing number of juveniles being placed in public facilities for serious crimes demonstrates that the state is doing well (National Criminal Justice Reference Service, 2012).

In addition, it is important to look at the percentages when they are broken down by cities in order to see which areas are most heavily affected by acts of juvenile delinquency. These statistics also demonstrate how physical surroundings have an impact on a person’s life. Factors such as poor schooling and high rates of poverty in a certain area may increase the likelihood of juvenile offending. All of this information is useful because programs need to be placed in the areas where those at risk live. The cities and towns that had the largest number of youth detained
at the training school were Providence, Pawtucket, Woonsocket, Cranston, Central Falls, and Warwick (Juvenile Justice in Rhode Island, 2008). In order to best serve the populations most heavily at risk, facilities that offer beneficial programs should be somewhere within these vicinities.

Risk Factors for Juvenile Delinquency:

For many years there has been an enormous amount of research conducted in order to find what the risk factors for delinquency are and which ones have a major impact on juveniles’ lives. Determining the main risk factors is the key to establishing successful programs that keep juveniles away from delinquency and or prevent them from recidivating. In addition, targeting these known risk factors at a very early age is crucial because, “…the earlier the age at which children begin offending, the more likely are the delinquent careers to be chronic and serious, with an increased probability of official delinquency” (Thornberry, 2002, p. 316).

One risk factor is lack of education. For instance, researchers Loeber and Dishion conducted a meta-analysis study that showed that poor school achievement, limited vocabulary, and low verbal reasoning skills by the end of elementary school are all strong predictors of delinquency occurring later in life (Yoshikawa, 2010). David Brandt also identifies education as a risk factor. According to him, “…children who have experienced academic and behavioral problems in the early grades are going to find the higher levels of education more difficult and frustrating, increasing the likelihood of truancy or dropping out completely... These teenagers are more likely to find themselves relating to other adolescents having similar difficulties… They are also more likely to be suspended or expelled from school, further increasing their isolation.” (Brandt, 2006, p. 54). These educational difficulties characterize most juveniles within the
Rhode Island Training School. For example, about half of the students at the Rhode Island Training School need to receive special education services. Also, “Of the 96 students at the Training School on January 15, 2008 with school records, 12 had failed all classes before entering the Training School. The average reading and math skills of students entering the Training School were at fifth grade levels” (Juvenile Justice in Rhode Island, 2008, p.6).

The second risk factor is family. Although young children spend much time at school, the majority of their time is spent at home with their parents and siblings. Therefore, the relationships within the home, and the environment it provides the child, influence the child greatly. Whether the impact is positive or negative is dependent on the safety of the environment and the quality of the parenting. According to White, parents who have criminal records tend to be aggressive and through their child-rearing practices will convey the message that aggression is an appropriate response to solving problems. White outlines three child-rearing practices in which parents, and/or caregivers, pass on this message, “… (1) by conveying values through their own actions and by what they approve; (2) by developing or failing to develop ties with family members and the community; and (3) by establishing legitimacy through the methods they use to enforce their desires on their offspring” (White, 200, p.229).

The third risk factor is peer influences. It is clear that in today’s society juveniles are heavily influenced by others their age with whom they spend the majority of their time. Many children are easily influenced and vulnerable; therefore, peer pressure is a huge issue both inside and outside of school. One group of friends that plays a tremendous role in a juvenile’s life is gangs. Many juveniles who choose to join gangs lack a support system at home and hope to form bonds and lifelong friends with gang members. The main three advantages of gangs, from an at risk youth’s perspective, are friendship, status, and protection against others. In order to
stay in the gang, most juveniles are willing to do anything one of the “leaders” asks, including

Gangs are not the only outlet to delinquency that juveniles face through peers. Those who are sent to the Training School are heavily influenced by the juveniles they meet there. Entering an unknown environment, filled with strangers, is an extremely scary and stressful situation for a young person. Naturally, they search for people there whom they can trust and with whom they can form friendships. Since the types of crimes the juveniles have been sent to the Training School for vary, the level of seriousness of each offense varies also. Putting these youth together can backfire because they can learn from one another. As a result, a juvenile might leave the Training School being more at risk than he or she was when placed there (National Criminal Justice Reference Service, 2012).

The fourth risk factor is poverty. “…low-income children are exposed to more violence, family disruption, and separation from their families than their middle-class contemporaries. They are more likely to be exposed to aggressive peers. Their parents are more likely to use harsher discipline and are less likely to be responsive to them and display less warmth” (Brandt, 2006, p.39). There have also been studies focusing on impoverished children in order to demonstrate that poverty plays a significant role in cognitive and behavioral disorders. Researchers from Duke University conducted a longitudinal study of psychiatric disorders among one thousand four hundred and twenty rural children in western North Carolina. Findings showed that symptoms, such as depression and anxiety, were more frequent among children living below the poverty line (Brandt, 2006). Cognitive behavior problems, such as depression and anxiety, play a major role in the child’s ability to focus in school, make friends, and live a constructive lifestyle. Psychiatric symptoms, including depression and anxiety disorders as well
as behavior disorders, were present at a significantly higher rate among children living below the poverty line (Brandt, 2006).

The fifth risk factor is maltreatment, including neglect and abuse. One study conducted in the Midwest used cases of child maltreatment provided by the court. “Children (ages 0-11 years) with substantiated cases of childhood abuse or neglect were matched with a control group of children of the same age, sex, race, and approximate social class, and both groups were followed up approximately 25 years later through examination of official criminal records. Findings indicated that child abuse and neglect increased the risk of arrest as a juvenile by 55% and increased the risk of committing a violent crime as a juvenile by 96%” (Bottoms, 2009, p.256).

Many children who are neglected or maltreated have parents who abuse drugs and or alcohol. These parents are highly likely to also experience domestic violence, single parenthood, a poor education, and depression. These “clusters” increase stress within the home and often lead to additional problems when occurring together at once. As a consequence, “Substance-abusing parents are also more likely to use harsh parenting styles and leave children unsupervised. Studies have shown that neglect is associated with delayed cognitive development in younger children and with behavior problems and poor school functioning in older children. Maltreatment may also be associated with deficits in cognitive, emotional, and behavioral development” (Wulczyn, 2009, p.35).

Another risk factor is being a teen parent. In 2008, fifteen percent of the female detainees at the Training School were pregnant. Eight percent of the detained males at the Training School reported already being a parent and two percent said they were expectant parents (Juvenile
Justice in Rhode Island, 2008). Many of the female juveniles drop out of school when they have a child. This has a tremendous impact on the rest of their life and presents them with numerous obstacles. As they get older, they try to balance maintaining a job while raising a child and usually don’t do this well (National Criminal Justice Reference Service, 2012).

Testimonies from Professionals:

Interviews with various professionals, who have had years of experience working with at-risk juveniles, were conducted. Their knowledge and opinions regarding what the risk factors are and what programs should be implemented correlated highly with the research. First, I spoke with Warren Hurlbut who was the acting superintendent for the Division of Juvenile Corrections Services for many years in Rhode Island. During our interview, he provided me with details of some of his experiences while he worked at the Rhode Island Training School. The information he shared parallels the statistics shown in the research I noted above. For instance, he shared that while he was at the Training School he noticed a disproportionate amount of African American and Hispanic juveniles. He also stated that a majority of them came from Providence, Pawtucket, Central Falls, Woonsocket, West Warwick, and Cranston. This observation coincides closely with what was outlined in “Juvenile Justice in Rhode Island”.

When I asked him his opinion regarding the major risk factors juveniles under his supervision faced, he stated that based on those he worked with, poverty, single parent families, poor education, child abuse and neglect, and substance abuse were the major ones. He also explained that one prominent issue was that many of the risk factors correlated with each other and created “clusters of risk factors”, meaning that the juveniles under his supervision would be at risk for several reasons. Two examples he provided for “cluster risk factors” were poverty and
poor education, and poverty and single parents. In other words, when a child comes from poverty, he or she is also more likely to receive a poor education since the family will most likely not be able to send the child to a good school, provide tutoring, and or other educational needs that may require money. Also, when a child comes from a single-parent home, the family’s source of income is much less and they become more at risk for poverty. “Clusters” not only increase the risk for delinquency for a juvenile, but they also make it slightly harder to target in typical rehabilitation programs because multiple issues, instead of one, would have to be addressed. “Child psychologists have pointed out that risk factors typically operate in clusters and are frequently correlated with each other. For example, poverty, parental neglect, and poor academic performance often occur together” (Brandt, 2006, p.23).

I also asked Mr. Hurlbut how he felt about the educational program and classes that are currently being offered at the Rhode Island Training School. He began by informing me that the subjects the juveniles need help with the most when they enter the Training School are math and reading. In his opinion, the quality of the educational program is very good because the classes are small and the teachers know which areas to target. However, because the juveniles do not remain at the Training School for a long period of time, the educational success while there can only go so far. Although residents’ reading scores are typically increased by at least two grade levels, according to Mr. Hurlbut, if they were there longer, the progress would be that much greater. That is why Mr. Hurlbut is a huge proponent of implementing more follow-up programs with the juveniles once they leave, especially in reference to their education.

He also pointed out that interventions need to be implemented sooner. Involvement with children and their families at risk should begin at a young age before serious behavior problems manifest themselves. First, he mentioned that schools should not wait until children are
extremely behind because the more delayed the help, the harder it is for students to catch up. Second, Headstart and other programs that provide quality child care are essential because they assist the parents and create a safe environment for the child. Third, since most high risk factors have been identified, nurses should begin helping the mothers who are at high risk from the time of the child’s birth. The nurse would be able to make sure the baby is healthy, that the mother is at a good place both emotionally and physically, and nurses could help mother’s kick their drug habits. According to Mr. Hurlbut, programs that have tried this type of assistance have been successful in reducing delinquency issues; however, the main problem is funding because this type of help is very expensive. Surprisingly, he ended the interview by telling me that he believes the Training School should be a last resort. Instead, he believes that the state needs more alternatives for those that are at a lower risk (W. Hurlbut, personal communication, March 5, 2012).

In 2010, I volunteered at the Rhode Island Training School and tutored two young girls for about two months. While there, I learned a lot about each girl, including the fact that each of them had many of the risk factors that were mentioned above. One of the girls, Rachel, was seventeen. The risk factors that she possessed were difficulties with education, family instability, peer influence, and physical abuse. For instance, she lived with her father, who abused her as a child, and she had a poor relationship with her mother who had been in prison during most of Rachel’s life. Rachel dropped out of school at sixteen, which was when she started getting into trouble and hanging out with older people who were a poor influence on her. Rachel was at the Training School because she attempted to rob a bank. She admitted that the reason why she did this was because she was hanging out with her older friends who suggested
this activity and convinced her to participate. She realized the influence they had over her and told me that she would try to make different friends when she left the Training School.

The other girl, Deanna, was 18. The risk factors that influenced her life were family instability, teen pregnancy, and difficulties with education. Deanna never met either of her parents and lived with her grandmother. She had a baby when she was 17, and subsequently disregarded her education as she attempted to care for her baby. Although she never told me what she did in order to be placed into the Training School, she did admit that it was her second time there, and that the reason she committed her crime was for money. She also confessed that she did not mind the Training School because it was a more stable environment than her home. Therefore, it was not a significant deterrent for her when she decided to commit a second crime because she knew she would not mind returning.

Despite their history of mistakes, both girls had goals and were hardworking. They were enthusiastic every week that I met with them and were always determined to do well. For instance, Rachel wanted to be a medical assistant, and Deanna wanted to apply to Rhode Island College. By the end of my two months with them, Rachel passed her GED and Deanna had an application and essay ready for Rhode Island College. Every week they were prepared to work and often had questions and assignments ready to show me. Even though my time with them was short, I believe I helped them greatly and seemed to make a lasting impact on their lives. The other volunteers that were tutoring there also experienced similar results. Although I do not know where Rachel and Deanna are now or what they did with their lives when they left the Training School, I do know that their attitudes and motivation increased in a positive direction during the two months I worked with them. Since funding is usually the main problem when
Another person I interviewed was Jessica Nash, Supervisor of Juvenile Probation at Kent County Courthouse. After being adjudicated as an offender, juveniles are allowed to remain in their community if their sentence is probation. The intensity of probation, including the amount of contact the youth has with the probation officer, depends on the offense committed. According to Ms. Nash, the majority of juveniles who have been sentenced to probation in Rhode Island have committed larceny or breaking and entering. The Division of the Department of Child, Youth, and Family supervises the adolescents placed on probation by the Family Court.

Ms. Nash’s job was to stay in touch with the juvenile as much as possible in order to provide the juvenile with a positive support system. One service the probation office offers is a phone line open twenty four hours a day, seven days a week. Another is the “Outreach and Tracking Program” which consists of the probation officers contacting the juveniles every day. These juveniles are also required to call in and there are recreation programs available so they may become involved in positive activities within a positive environment. Another monitoring system that is relatively new within Rhode Island is the use of ankle bracelets during juveniles’ probation in order to keep track of where they are at all times. Although it was controversial in the beginning, Ms. Nash reported that since implemented, they have been beneficial because the juveniles are never taken out of the community; therefore, they can adjust and change their behaviors within their own environment. This strategy eliminates the difficult step of transitioning. When I asked Ms. Nash what the most challenging part of her job was, she informed me that getting everyone together and coordinating can be difficult in many circumstances. For instance, including family and friends in a juvenile’s rehabilitation is
important, but sometimes finding those that would provide a positive support system and convincing them to become involved can be complicated (J. Nash, personal communication, April 9, 2012).

Since the major risk factors of juveniles have been listed and described using academic research and testimony from those with experience in the field, it is also important to address current organizations within the community that offer programs targeting these factors for those juveniles who are in most need of help. One organization that I researched is Boys’ Town. When young adults who were at-risk-kids in Boys Town Treatment Family Homes were compared with at-risk-kids in outplacement foster homes, ninety-one percent of those in Boys’ Town graduated from high school, compared to sixty-four percent in outplacement foster homes. In addition, sixty-six percent of those in Boys’ Town found employment in comparison to forty-seven percent of those in outplacement foster homes (Boys Town New England, 2011).

From Boys’ Town, I spoke with Debra Sharpe, Director of Development, and Barbara Nwaehi, Program Operations Manager. One of the most popular and successful programs Boys’ Town has to offer is their “Family Reunification Program”. The mission of this program is targeting the previously mentioned risk factors by matching each family to the juvenile’s risks with services appropriate to their needs. The “Family Reunification Program” includes both Treatment Family Home care as well as In-Home Family programs. They are designed for those juveniles who need out-of-home placement, but still hope to eventually return home in a positive way. The “family homes” these juveniles are placed in consist of two “parents”, an assistant, and about five to six children. They all live together in one of the homes on the Boys’ Town property and serve as a stable family structure for these youth. They are also a positive support system within the youth’s life. Therefore, this kind of environment addresses the challenge
(finding a positive support system) that Ms. Nash described in her interview. These children are either under jurisdiction of the court, on probation, or at risk of delinquency. Usually, the referrals Boys’ Town receives for this program come from the courts or probation officers. On average, the juvenile will receive about four to six months of family style residential care while the family receives in home intervention. Once the youth returns home, the services continue for about three more months.

In order to determine which services will work best for each child and family, the workers at Boys’ Town use a worksheet that identifies the “strengths” and “stressors” of each family. This worksheet outlines a total of eight areas. They include environment, social support, parental capabilities, family interactions, family safety, child well-being, caregiver/child ambivalence, and readiness for reunification. Each category is rated in order for both the workers and the family to know which areas need to be focused on and worked on the most.

Another unique aspect of Boys’ Town is their “Integrated Continuum of Care”. The purpose of this is to distribute the appropriate care to each child and family that seeks assistance. There are seven levels of the “Integrated Continuum of Care” which are Intensive Residential Treatment, Specialized Treatment Group Home, Intervention and Assessment Services, Family Homes, Foster Family Services, In-Home Family Services, and Community Support Services. The children and families move either up or down between the levels depending on their progress or setbacks. “Services at the top of the Continuum provide intensive care to children with serious emotional or behavioral problems. ..Services at the bottom of the Continuum help families stay together through training, counseling and other measures available to any family” (Boys Town New England, 2011, p.1).
During the interviews with Ms. Sharpe and Mrs. Nwaehi, I asked them if they wanted to share a story that was an example of how Boys’ Town provides a positive influence on the juveniles under their supervision. They immediately began telling me about a young boy who was recommended to them by DCYF when he was twelve years old. First, they explained that he had many of the risk factors previously mentioned, such as poor education and an unstable family environment. His parents were not involved in his life, and he lived with his grandmother and siblings. When he reached the seventh grade, he stopped attending school. In addition, he was sentenced to a probationary period after being involved in a bar fight. After continuously violating his probation, his grandmother decided it was best for him to be placed in the care of a residential facility that could better monitor him and his actions. Ms. Sharpe and Mrs. Nwaehi explained that when DCYF referred him to them, his file was extremely thick and full of past offenses. When he was first sent to them, he was extremely resistant and ran away numerous nights during the first couple of weeks. Eventually, one of the workers discovered that he enjoyed basketball and used it as a way to release his frustration and negative energy. They began to use the sport as a positive reinforcement strategy. Slowly, they gained his trust and his behaviors and dedication to school began improving. After living in one of the Boys’ Town Homes for about a year, he returned to his grandmother’s house and began living a much different life. Boys’ Town stayed involved with him through in home treatment, and even today he keeps in touch with those who dedicated their time to helping him. Ms. Sharpe and Mrs. Nwaehi both had smiles on their faces when they ended by informing me that he not only finished high school, but received the “student of the month” award before graduating.

The biggest challenge Ms. Sharpe and Mrs. Nwaehi shared was their organization’s lack of recognition. Unfortunately, not many people are aware of this organization’s existence. They
are currently working on getting their name out there more so that the community may take advantage of the many programs and services they offer. The more children and families they can assist, the more benefits that spread within the state. (D. Sharpe and B. Nwaehi, personal communication, April 3, 2012).

Another organization is working with troubled youth is Child and Family Services. I spoke with Robert Archer, Director of the East Bay Family Care Community Partnership there. His work involves the Family Care Community Partnership (FCCP), which is funded by the Department of Child Youth and Family (DCYF). There are also three other FCCP locations serving families in Rhode Island so that children and their families from each part of the state have this opportunity. “The FCCP brings community-based service providers, family members and friends together to build a stronger, brighter future for your family. After meeting with you to assess your needs, the FCCP puts you, the family, in the center and wraps you with the right local services, community programs and family members and friends in an effort to craft an individualized plan” (Family Care Community Partnership, 2012, p.1). The population this partnership works with includes children from birth to age eighteen who have serious emotional, behavioral, and/or mental health challenges, those who are transitioning from the Juvenile Correctional Facility back into the community, and those who are at risk of involvement with DCYF. Therefore, this organization does an excellent job in addressing the challenge the Rhode Island Training School faces that Mr. Hurlbut mentioned in my interview with him; specifically, assisting juveniles in transferring out of the Training School and back into the community.

The way in which the risk factors are assessed by the FCCP is called the “Wraparound Process”. This is a way of identifying the individual and or family’s needs, risk factors, and goals in order for the appropriate programs and services to be identified. It is somewhat similar
to the “Strengths and Stressors” worksheet that Boys’ Town uses. Mr. Archer outlined the four steps of this particular “Wraparound Process” assessment. The four main steps of it are finding strengths, engaging the family, involving the community, and beginning the appropriate programs. Some examples of services offered through Child and Family Services are residential care, counseling, and school based programs.

He also stated, “I am not a believer in needing to acquire more funds or money in order to create success. Shifting resources and using them wisely is key. That is why partnering with other organizations and working closely with DCYF is so important.” For Mr. Archer and others at Child and Family Services, the main challenge is establishing hope in both the children and their families from the very beginning. The staff tries their best to show their clients that they can create a different future for themselves. According to Mr. Archer, making each person believe that the results will show after their dedication and hard work is the hardest part of his job (R. Archer, personal communication, April 5, 2012).

Connection to Pell Program and Senator Pell:

Senator Pell once stated, “I have always considered a certain seven-word phrase my creed as United States Senator: Translate ideas into action and help people” (About Senator Pell, 2012). This principle correlates with the public policy law of Rhode Island which maintains that it is the responsibility and duty of agencies and services within the state to address the most prevalent risks faced by juveniles and protect them from the harm posed by these risks. In addition, both Senator Pell and the Pell program stress the importance of an education and involvement within the community as the best path to informed citizenship. Senator Pell’s belief in the importance of education is demonstrated through his Pell grants which were established to
help those in need of financial assistance when paying for their education. Many of the grants were originally given to offenders since he realized that an increase in education reduced the likelihood of them recidivating and consequently improved the community (About Senator Pell, 2012, p.1). If this state and its professionals continue the path they are on and work towards facing the challenges presented to them, the future is hopeful and juvenile delinquency will continue to decrease.

Conclusion:

As the above statistics and commentary demonstrate, programs and services are successful when they target an individual’s risk factors. Proof that the current services and agencies in Rhode Island are working is illustrated through the dramatic decrease in juvenile delinquency during the past few years. A couple of years ago there were one thousand four hundred juveniles on probation in Rhode Island, now only about seven-hundred juveniles are. Those in residential facilities within the state, both public and private have also decreased. In 1997, there were approximately four-hundred and twenty-six juveniles placed adjudicated delinquent and placed in a residential facility. As of 2010, there are only two-hundred and forty nine juveniles in residential facilities (Office of Juvenile Justice and Delinquency Prevention, 2010). “As active members of the community, we share a vision that all children, youth and families reach their fullest potential in a safe and nurturing environment” (Department of Children Youth and Families, 2009, p.1).
References


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